# P1000079040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP      ☐ WAIT      ☐ MAIL
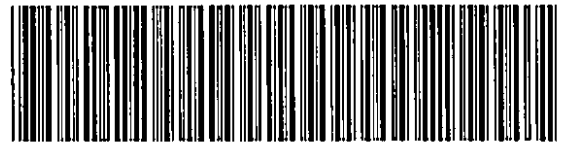
(Business Entity Name)

(Document Number)

Certified Copies _____      Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

FILED
18 JUL 30 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 02 2018
S. YOUNG

## COVER LETTER

NAME OF CORPORATION: GNG ELECTRIC SERVICES CORP

DOCUMENT NUMBER: P17000079040

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

BRAYAN R GALVEZ

_Name of Contact Person_

GNG ELECTRIC SERVICES CORP

_Firm/ Company_

921 MULHOLLAND DR

_Address_

WEST PALM BEACH, FL 33415

_City/ State and Zip Code_

GNGELECTRICSERVICESCORP@OUTLOOK.COM

_E-mail address: (to be used for future annual report notification)_

For further information concerning this matter, please call:

BRAYAN R GALVEZ                                    at ( 561 ) 707-4428

_Name of Contact Person_                    _Area Code & Daytime Telephone Number_

Enclosed is a check for the following amount made payable to the Florida Department of State:

| ■ $35 Filing Fee | ☐$43.75 Filing Fee & Certificate of Status | ☐$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |

**Mailing Address**
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address**
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Articles of Amendment**
**to**
**Articles of Incorporation**
**of**

GNG ELECTRIC SERVICES CORP

**(Name of Corporation as currently filed with the Florida Dept. of State)**

P17000079040

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A
_____*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**
*(Principal office address MUST BE A STREET ADDRESS )*

N/A

**C. Enter new mailing address, if applicable:**
*(Mailing address MAY BE A POST OFFICE BOX)*

FILED
18 JUL 30 AM 8: 13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

*Name of New Registered Agent*  N/A _____

_____
*(Florida street address)*

*New Registered Office Address:* _____, Florida_____
                                     *(City)*                         *(Zip Code)*

**New Registered Agent's Signature, if changing Registered Agent:**
*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

_____
*Signature of New Registered Agent, if changing*

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

**Example:**

| X Change | PT | John Doe |
|----------|----|----------|

| X Remove | V | Mike Jones |
|----------|----|-----------|

| X Add | SV | Sally Smith |
|-------|----|------------|

| Type of Action (Check One) | Title | Name | Address |
|---|---|---|---|
| 1) ____ Change<br>____ Add<br>X Remove | Direct | Wilter Estrada | 4502 NW 185 ST<br>MIAMI GARDENS, FL 33055 |
| 2) ____ Change<br>____ Add<br>____ Remove | | | |
| 3) ____ Change<br>____ Add<br>____ Remove | | | |
| 4) ____ Change<br>____ Add<br>____ Remove | | | |
| 5) ____ Change<br>____ Add<br>____ Remove | | | |
| 6) ____ Change<br>____ Add<br>____ Remove | | | |

**E.  If amending or adding additional Articles, enter change(s) here:**
(Attach *additional sheets, if necessary). (Be specific)*

N/A

**F.  If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**
(*if not applicable, indicate N/A*)

N/A

N/A

The date of each amendment(s) adoption: _____ , if other than th
date this document was signed.

N/A

Effective date if applicable: _____

*(no more than 90 days after amendment file date)*

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th
document's effective date on the Department of State's records.

**Adoption of Amendment(s)**          **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
by the shareholders was/were sufficient for approval.

■ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement
must be separately provided for each voting group entitled to vote separately on the amendment(s):*
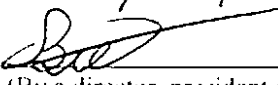
"The number of votes cast for the amendment(s) was/were sufficient for approval

by    BRAYAN R GALVEZ,                                              "
    _____

*(voting group)*

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder
action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder
action was not required.

Dated_____7/27/2018_____

Signature_____

(By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)

_Brayan Galvez_____
(Typed or printed name of person signing)

_PRESIDENT_____
(Title of person signing)