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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GOLD SERVICES	INC			1,1
DOCUMENT NUMB	P95000002725				-
The enclosed Articles	of Amendment and fee are sub	mitted for filir	ıg.		
Please return all corres	pondence concerning this mate	ter to the follow	wing:		
	CLAUDIA GUERRERO				
•		Name of Co	ntact Person)	
	PREFERRED ACCOUNTAX	CENTER IN	С		
		Firm/ C	ompany		
	4169 NE 14TH ST		•		
		Ado	lress		
	HOMESTEAD, FL 33033				
		City/ State a	nd Zip Code	•	
		•	·		
claud	a867@bellsouth.net E-mail address: (to be us	-1 C- C		natification)	
	E-mail address: (to be us	ed for future at	inual report	notification)	
For further information	concerning this matter, pleas	e call:			
CLAUDIA GUERRE	RO	at (786	299-0771	
Name of Contact Person				de & Daytime Telephone Number	_
Enclosed is a check for	r the following amount made p	payable to the I	Florida Depa	artment of State:	
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Fil Certified ((Additiona enclosed)	Сору	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 abassee, FL 32314	tion Amendment Section orations Division of Corporations Clifton Building			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GOLD SERVICES INC.	73.74	-10	7.1
(Name of Corporation as currently filed with the Florida Dept. of State)	17 A	- E	C
P95000002725		ري. بن	
(Document Number of Corporation (if known)	75	9	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the follows Articles of Incorporation:	wing ame	ndmer	ıt(s) t
a. If amending name, enter the new name of the corporation:			
GSE INDUSTRIAL INC.	The	new	
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name moverd "chartered," "professional association," or the abbreviation "P.A."	abbrev	iation	
3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	_		
). 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			
(Florida street address)			
New Registered Office Address: , Florida			
	Zip Code)		
New Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	9 n .		

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			The second distance of the second sec
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
			*
6) Change			
Add			
Remove			

•	dditional Articles, enter change(s) ho if necessary). (Be specific)		
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	<u> </u>		
f an amendment provid	es for an exchange, reclassification,	or cancellation of issued shares,	
(if not applicable, in	nting the amendment if not containe	d in the amendment itself:	
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07/06/2015
The date of each amendment(s) adoption:, if other than date this document was signed.
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 document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ 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" (voting group)
(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.
07/06/2015 Dated /
Signature X Signature X
(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 tiduciary by that fiduciary)
(Typed or printed name of person signing)
(Typed or printed name of person signing)
X TREASURER.
(Title of person signing)