P98000030730

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(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
(organicazion none #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
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Certified Copies Certificates of Status	_
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Special Instructions to Filing Officer:	١
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Office Use Only

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SECRETARY OF STATE

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 C.COULLIETTE
 FEB 1 3 2012

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: G P POLY	JREA, INC.	
	_{R:} P9800003073	0	
	Amendment and fee are su	:	
Please return all correspo	ondence concerning this ma	tter to the following:	
C	SARY BIEDERM	AN	
-		Name of Contact Person	1
	P POLYUREA	, INC.	
_		Firm/ Company	
_2	071 NE 25TH S	TREET :	
		Address	
<u>L</u>	IGHTHOUSE P		
		City/ State and Zip Code	e
ALA	NBERLINER@B	ELLSOUTH.NE	Т
		sed for future annual report	
For further information of	oncerning this matter, pleas	se call:	
ALANBERLINE	R@BELLSOUT	H.NET _{at (} 954	202-0202
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	he following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy
	enclosed)	(Additional C	opy is enclosed)
3.6 131	g Address	Street	Address

Articles of Amendment to: Articles of Incorporation of:

G P POLYUREA, INC.			
(Name of Corporation as currently filed with the Florida Dept. of State)			
P98000030730			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following its Articles of Incorporation:	amen	dmen	t(s) to
A. If amending name, enter the new name of the corporation:			
SOUTHERN FOAM & COATINGS, INC.	The	Malu	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the ab "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must c word "chartered," "professional association," or the abbreviation "P.A."	brevia	tion	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ec 1		
		2 FEB	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		13 PH 4:0	FILED
	PIDA PIDA	0	
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			
(Florida street address)			
New Registered Office Address:, Florida			
(City): (Zip Code)			
r ·			
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.			
The cos decept the appointment as registered agent. I am jumittal with and accept the obligations of the position,			
Signature of New Registered Agent, if changing			

Page 1 of 4

If amending the Officers and/or Directors, enter the title and n	ame 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 <math>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 D	<u>oe</u>				
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	:			
X Add	<u>sv</u>	Sally S	<u>mith</u>	: :			•
Type of Action (Check One)	<u>Title</u>		<u>Name</u>			<u>Addres</u> s	
I) Change		<u>_</u>	···	:	<u>.</u>		· · · · · · · · · · · · · · · · · · ·
2) Change Add Remove		_			-		
3) Change Add Remove		_					
4) Change Add Remove		-		 · · · · · · · · · · · · · · · · · · ·	-		
5) Change Add Remove		_	<u></u>				
6) Change Add Remove			·				

If amending or adding additional Articl (attach additional sheets, if necessary).	ies, enter change(s) hi (Be specific)	ere:
•		
		· :
		
The second secon		
		:
 If an amendment provides for an exchan provisions for implementing the amend 	nge, reclassification, of Ament if not contained	or cancellation of issued shares, d in the amendment itself:
(if not applicable, indicate N/A)		•
		:
		:
		:
		i e

The date of each amendmen	nt(s) adoption: 01/27/2012	
Effective date if applicable:		! !
	(no more than 90 c	lays after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
	ere adopted by the shareholders. The new ere sufficient for approval.	imber of votes cast for the amendment(s)
	ere approved by the shareholders throug ded for each voting group entitled to voi	th voting groups. The following statement te separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were s	: ufficient for approval
by		
	(voting group)	:
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors wi	thout shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators withou	t shareholder action and shareholder
Dated JA	NUARY 27, 2012	<u>.</u>
Signature _	Juy Dieder	war
	By a director, president or other officer selected by an incorporator – if in the h	if directors or officers have not been ands of a receiver, trustee, or other court
	appointed fiduciary by that fiduciary)	:
	GARY BIEDERMA	N
	(Typed or printed nar	ne of person signing)
	PRESIDENT	;
	(Title of person sig	ning)