FILED May 16, 2000 8:00 am Secretary of State 03-04-2000 90117 017 ***150.00

DOCUMENT # P99000074086 1. Entity Name G & L SHELL CONTRACTORS, INC.

Principal Place of	of Business	Mailing Address		7			
1220 NW 2ND ST CORAL SPRINGS FL 33071		9220 NW 2ND ST CORAL SPRINGS FL 33071-69	m				
CHAL SENINGS	FL 33071	CORAL SERINGS FE 33071-03	~	4			
2. Principal Plac	ce of Ausiness	3. Mailing Address					
1270 Suite, Apt. #.	Eagle Pointe Circle		Pointe Circle		RITE IN THIS SPACE	. 1 1 11 11 11 11 11 11 11 11 11 11 11 11 11	
City & State	vers, FL	City & State Fort Myers.	FL	4. FEI Number 65-09450	40 Not	plied For Applicable	
33913	Country	33913	- Country - USA	5. Certificate of Status Desired	9 \$8.75 Addi Fee Required		
	6. Name and Address of Current F	Registered Agent	Name	7. Name and Address of Nev	Registered Agent		
CLIATE	ELA, GEORGE			Quatela, Geo			
9220 N	IW 2ND ST		Street Addres	s (P.O. Box Number is Not Accepta	Ciecle		
CORAI	SPRINGS FL 33071		Ft.	Myers FL 3	3913		
			City FT. N	lvers	FL Zugge	13.	
8. The above n	amed entity submits this statement for	the purpose of changing its r	egistered office or regis	tered agent, or both, in the State of	Florida.		
SIGNATURE	2 ann 8 (D. +ala	Page: 1 put	fano.	On Tile	7-29-	2000	
·SIGNATURE S	ignature, lyped or printed name of registered agent e	nd title if applicable. (NOTE:	Registered Agent, gnajure requ	ired when reinstating)	DATE		
•	ation is eligible to satisfy its Intangible quirement and elects to do so. a on back}	After MAY 1, 200	l FEE IS \$150.00 O Fee will be \$550.00 e to Department of S			O May Be to Fees	
11.	OFFICERS AND		12.	ADDITIONS/CHANGES TO C			æ
TITLE NAME	President George Quatela	☐ Delele	TITLE NAME		☐ Change	Addition :	CR2E034 (9/99)
STREET ADDRESS	12701 Faale Printe	lieche	STREET ADDRESS			1	034
CITY-ST-ZIP	Ft. Myers, FL 33	<u> </u>	CITY-ST-ZIP		☐ Change	Addition	ÄŽE
TITLE NAME		☐ Delete	TITLE NAME		☐ Citalige	Acquion	
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP			1	
CITY-ST-ZIP	Vice-President	☐ Delete	THLE		☐ Change	Addition	
NAME	VicePresident LARRY YINSON 435 Jahn Ave. N.		NAME		-		
STREET ADDRESS CITY-ST-ZIP	NADIES, FL 34	γ. 12.Δ	STREET ADDRESS CITY-ST-ZIP				
TITLE	MITPIES I DI	☐ Delete	TITLE		☐ Change	Addition	
NAME STREET ADDRESS		•	NAME Street address				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE		☐ Delete	TITLE		☐ Change	☐ Addilion	
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP		•	CITY-ST-ZIP				
TITLE NAME		☐ Deleta	TITLE NAME		☐ Change	Addition	
STREET ADDRESS	•,		STREET ADDRESS				
CITY-SY-ZIP	ar accepted to the second of the second	- ALC - 707 1	CITY-ST-ZIP	Cooker 440 OTIONS Florida Co.	In I frush a section of the section of	information	
indicated of the cor	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with an address,	s true and accurate and that mo owered to execute this report	ny signature shall have t	he same legal effect as il made uni	der oath; that I am an officer	or director	
SIGNAT	HRE. SKINATA	Marth.	*	Spalan	941-1241-	4297	i
SIGNAL	SIGNATURE AND TYPE O OR	PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	000	Davime Phone #	- WUL.	