

V51370

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08/19/07--01009--008 **35.00

Amend

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 SEP 19 PM 4:16

FILED

SEP 25 2007

JOSEPH A. TROIANO, ESQ., PA

A PROFESSIONAL ASSOCIATION

12800 UNIVERSITY DRIVE, SUITE 380
FORT MYERS, FL 33907
239.482.3998 DIRECT
239.823.5222 CELL PHONE
239.466.2866 FAX
jat621@comcast.net

September 14, 2007

PRIVATE AND CONFIDENTIAL

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

RE: GULFCOAST TRANSPORTATION SYSTEMS, INC.

Dear Sir or Madam:

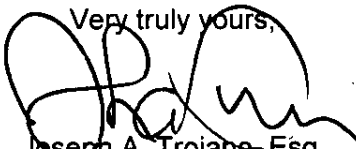
Enclosed for filing please find an Articles of Amendment to the Articles of Incorporation of Gulfcoast Transportation System, Inc.

Also enclosed is our check in the amount of \$35.00 for the required filing fee.

Please return the approved Articles of Amendment to this office in the postage paid return envelope that we have provided.

Thank you for your assistance. Should you have any questions or require additional information, please feel free to contact me.

Very truly yours,



Joseph A. Troiano, Esq.
For the Firm

JAT/dr
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GULFCOAST TRANSPORTATION SYSTEMS, INC.

DOCUMENT NUMBER: V51370

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

Please return all correspondence concerning this matter to the following:

JOSEPH A. TROIANO, ESQ.

(Name of Contact Person)

JOSEPH A. TROIANO, ESQ., P.A.

(Firm/ Company)

12800 UNIVERSITY DRIVE, SUITE 380

(Address)

FORT MYERS, FL 33907

(City/ State and Zip Code)

For further information concerning this matter, please call:

JOSEPH A. TROIANO, ESQ.

(Name of Contact Person)

at (239) 482-3998

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

ARTICLE V IS BEING AMENDED AS FOLLOWS:

**THE CORPORATION IS AUTHORIZED TO ISSUE 1,000 SHARES OF NO PAR
VALUE COMMON STOCK.**

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: SEPTEMBER 3, 2007

Effective date if applicable: UPON FILING
(no more than 90 days after amendment file date)

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

☒ The amendment(s) was/were approved 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):*

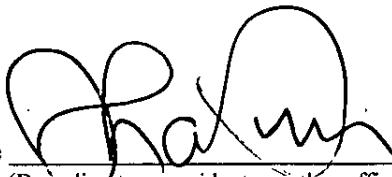
"The number of votes cast for the amendment(s) was/were sufficient for approval by

(voting group)"

☐ 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.

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)

JOSEPH A. TROIANO

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

FILING FEE: \$35