1906000135335

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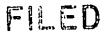
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GP Wealth Manage	ement	
DOCUMENT NUMBER: P06000135335		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Gregory Pacitti		
	Name of Contact Person	
Pacitti Group		
	Firm/ Company	
20011 65th Ave E		
	Address	
Bradenton, Fl 34211		
	City/ State and Zip Code	
gp@pacittigroup.com		
	sed for future annual report notification)	
is-man address. No be as	sed for fature annual report notification,	
For further information concerning this matter, pleas	se call:	
GREBS PACITI	at (941) 737-7575 Area Code & Daytime Telephone Number	
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 S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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

Articles of Incorporation of



to

GP Wealth Management SNC.	2018 DEC 26 AM 11: 15
(Name of Corporation	as currently filed with the Florida Dept. of State)
P06000135335	SECRETALUTOTSTATE TALLAHDSSEFLEL
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corp	ooration:
Pacitti Group Inc.	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	LEGG.)
(Principal office address <u>MUST BE A STREET ADDR</u>	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
Name of New Registered Agent	<u></u>
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I describe the appointment as registered agent.	tered Agent: am familiar with and accept the obligations of the position.
Signati	ure 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 Doc	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
S) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach ada	ng or adding additional sheets, if nec	essary). (Be spe	ecific)				
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_							
If an amer	ndment provides for	an exchange, rec	classification, o	or cancellation	of issued shares	عا	
provision (if no	is for implementing it applicable, indicate	the amendment i ? N/A)	f not contained	d in the amend	ment itself:		
							
···· —			_				
							
	<u>_</u>		<u></u>				

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.	: 1.10	
Effective date if applicable:	1-1-19	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment icient for approval.	nt(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	meni
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
,	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	12/21/18	
Signature	ASST	
(By a dir selected.	ector, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other of d fiduciary by that fiduciary)	
	GREGORY PACITII	
-	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	