P03000003271

(Re	equestor's Name)	
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`	8535 Posey I	
J.	acksonville, FL	32220
	ty/State/Zip/Phone	
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PICK-UP	WAIT	MAIL
(Bi	usiness Entity Nan	ne)
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	

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12/12/14--01006--006 **35.00

Amend Name 10 P/30/14

ACCOUNT NO. : I2000000195

REFERENCE : 436760 4732152

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 29, 2014

ORDER TIME : 10:18 AM

ORDER NO. : 436760-005

CUSTOMER NO: 4732152

DOMESTIC AMENDMENT FILING

NAME:

GEMINI HOLDINGS OF NORTH

FLORIDA, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT

RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Gemini Holdings of North Florida, Inc. DOCUMENT NUMBER: P0300003271 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pat Martinez Name of Contact Person Gemini Holdings of North Florida, Inc Firm/ Company 8535 Posey Road Address Jacksonville, FL 32220 City/ State and Zip Code patm@geminiwarehouse.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Pat Matinez Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Notes and Code and Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:	
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S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status	
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	



December 16, 2014

GEMINI HOLDINGS OF NORTH FLORIDA, INC. 8535 POSEY ROAD JACKSONVILLE, FL 32220

RESUBMIT

Please give original submission date as file date.

SUBJECT: GEMINI HOLDINGS OF NORTH FLORIDA, INC.

Ref. Number: P03000003271

We have received your document for GEMINI HOLDINGS OF NORTH FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000156881 - GEMINI LOGISTICS LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 814A00026504

DEPARTMENT OF STATE

Articles of Amendment to Articles of Incorporation of

Gemini Holdings of North Florida, Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
p0300003271	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.)006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following american statutes of Incorporation:	idment(s) to
A. If amending name, enter the new name of the corporation:	
Gemini Logistics of North Florida, Inc	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevi "Corp.," "Inc.," or Co," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	ation
B. 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)	14 DEC 12 M
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:	FM 95 52
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
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. 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.

X Change	<u>PT</u>	John Doe	
X Remove	Ā	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	Colleen Delk	8535 Posey Road
Add			Jacksonville, FL 32220
Remove	-		
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			Secretary of the second
Remove			
5) Change			
Add	<u></u>		
Remove			
6) Change			
Add			
Remove			

	ding additional Arti theets, if necessary).	(Be specific)			

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orovisions for in	provides for an exclude an exclude and	hange, reclassific endment if not co	ation, or cancellat ntained in the ame	ion of issued share indment itself:	<u>5,</u>
(if not applic	able. indicate N/A)				
					
		· · · · · · · · · · · · · · · · · · ·		_ _	· -
					

The date of each amendment	t(s) adoption: December 23, 2014	, if other than th
date this document was signed		
Effective date if applicable:	December 23, 2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	n	
• • • • • • • • • • • • • • • • • • • •	(voling group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated	Patura CMatin	
Signature	Patrice Competer	_
	By a director, president or other officer - if directors or officers have not been elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
	appointed fiduciary by that fiduciary)	
	Patricia C. Martinez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	