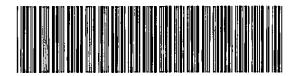
## 716916

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
,	
(1) rong form	
Office Use Only	



### 600390853316

07/14/22--01014--022 \*\*52.50

2022 DEC 16 PH 2: 27

DEC 1 " Page

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Gainesville Multi	ple Listing, Inc.	
DOCUMENT NUM			
	es of Amendment and fee are s	submitted for filing.	
Please return all corr	respondence concerning this m	atter to the following:	
	Lisa Gurske		
	<del></del> -	Name of Contact Perso	n
	Gainesville-Alachua County	Association of REALTORS	S
	<del></del>	Firm/ Company	<del></del>
	1750 NW 80th Blvd	1.3	
		Address	
	Gainesville, FL 32606		
		City/ State and Zip Cod	c
	LGurske@gacar.com		
	E-mail address: (to be u	sed for future annual report	notification)
	on concerning this matter, plea	se call:	8 <b>8</b>
Name of Contact Person		at (Area Coo	) de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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		Amendi Division The Ce 2415 N	Address ment Section of Corporations ontre of Tallahassee Monroe Street, Suite 810 ssee, FL 32303



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2022

GAINESVILLE ALACHUA COUNTY ASSOCIATION OF REALTORS 1750 NW 80TH BLVD GAINESVILLE, FL 32606

We have received your document for GAINESVILLE MULTIPLE LISTING, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA NONPROFIT CORPORATION. Please complete and return the enclosed blank form(s).

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) 245-6939.

Stacy Prather Regulatory Specialist III

Letter Number: 222A00022894

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

Gainesville Multiple Listing, Inc.  NAME OF CORPORATION:
716916
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lisa Gurske
(Name of Contact Person)
Gainesville-Alachua County Association of REALTORS
(Firm/ Company)
1750 NW 80th Blvd
(Address)
Gainesville, FL 32606
(City/ State and Zip Code)
LGurske@gacar.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
John R. Roscow, IV, Attorney (or Rita Worley)  352-373-7788  at
(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 ☐ \$43.75 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  ☐ \$43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# 2022 DEC 16 PH 2: 27

#### Articles of Amendment to Articles of Incorporation of

GAINESVILLE MULTIPLE LISTING, INC.	_	
(Name of Corporation as currently filed with the Florida l	Dept. of State)	
716916		*.:-
(Document Numb	per of Corporation (if kno	own)
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i>	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat		
GMLS HOLDINGS, INC., A FLORIDA NOT FOR PROFIT		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ition" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS	)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		······································
D. If amending the registered agent and/or registered offi	ice address in Florida, c	enter the name of the
new registered agent and/or the new registered office a	address:	
Name of New Registered Agent: N/A		
	(Flor	rida street address)
New Registered Office Address:		
N/A		Florida, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	l Agent: miliar with and accept to	he obligations of the position.
Kila		
_1 <u>\text{\text{M}}_S</u>	ignature of New Register	red 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)

Example:

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
l) Change			
Add			<del></del>
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

			<del></del>
<del></del>			
		_	<u> </u>
<u> </u>		-	
	<u> </u>		
<del></del>			-
	<del>-</del>		
		<u> </u>	
· · · · · · · · · · · · · · · · · · ·	<u> </u>	<del></del>	
· · · · · · · · · · · · · · · · · · ·			<del></del>
		<u>_</u>	_
		_ <del></del>	
<u></u> .			
<del>-</del>		-	
Name to 20	21		
November 18, 20	∠ 1		, if other thar
,, #40prion			
N/A			
(no more than 90 da	ve after an andmont	le date)	
		s) adoption:	s) adoption:

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated X Nicember 72002
Signature (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Lisa Gurske
(Typed or printed name of person signing)
CEO

(Title of person signing)