## 768537

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	Gate Acric	4828	Frohmol O	2-de . H
DOCUMENT NUMBER: 768537		, , , , , , , , , , , , , , , , , , ,		
The enclosed Articles of Amendment and fee are sub-	nitted for filing.			
Please return all correspondence concerning this matte	er to the following:			<b>2</b>
Joh	n Johnson			וטנ ח
	(Name of Contact Perso	on)		2817 JUL -5 AM 10: 37
	(Firm/ Company)			
4111 60	(Address)			
	(Address)		<del>,</del>	
Nades	F1. 34116			
	F1. 34116 (City/ State and Zip Coo	de)		<del></del>
easles 4028 E-mail address: (to be used	@ gmo, l, com	notification)		
For further information concerning this matter, please				
John Johnson	at	239 - 5	592-300E	5
(Name of Contact Person	) (A	rea Code) (D	aytime Telephone l	Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	artment of State	:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Fil Certificate Certified C (Additiona Enclosed)	of Status opy	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Amen Divisi	Address dment Section on of Corporation Building	ons	

2661 Executive Center Circle Taliahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



76 8537				
(Docume	ent Number o	f'Corporation	(if known)	
Pursuant to the provisions of section 617,1006, Floric amendment(s) to its Articles of Incorporation:	da Statutes, tl	us <i>Florida N</i> e	ot For Profit C	orporation adopts the following
A. If amending name, enter the new name of the contain must be distinguishable and contain the world				The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	"corporation	" or "incorpe	rated" or the o	abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)	le: DRESS )	N/A		
	_			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0X</u> )	N/A		
D. If amending the registered agent and/or registered new registered agent and/or the new registered				<del></del>
Name of New Registered Agent:	J34~	Johns	٥n	
	4///	Grown	olrd,	
New Registered Office Address:			iFlorida street	addressi
	,	Necles		34116
-		Cina	_	Florida <b>3 4#16</b>
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	gistered Age	<u>:nt:</u>		

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 officeheld, 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 X Remove X Add	<u>V</u> <u>Mike</u>	Doe e Jones e Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Donald J. Ellis	4111 Green 6/0). Naples, F1. 34116
<ul><li>✓ Remove</li><li>2) Change</li><li> Add</li></ul>	<u>T</u>	Parker Gile	4111 Grun Blod Noples, Fl. 34116
X Remove 3.) Change Add		Howard C. Boynton	4111 Gram 0112 Naples, Fl. 34116
Remove  4) Change	4	John Johnson	4111 Green 0/2) Noples Fl. 3411L
7) Change Add	1	Doug Turker	HIII Green Blod Naples, Fl. 34116
Remove  6) Change  Add	_5	Seon Alger	4111 Gran 010) Naples, Fl. 34116
Remove		Page 2 of 4	

attach additional sheets, if necessary).	(Be specific)
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	<del></del>

The date of each amendment(s) adopti date this document was signed.	- $($	, if other than the
Effective date <u>if applicable</u> :	6/30/17	
	tho more (han 90 days after amendment file date)	
Note: If the date inserted in this block d document's effective date on the Departi	oes not meet the applicable statutory filing requirements, this date nent of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adoptowas/were sufficient for approval.	ed by the members and the number of votes east for the umendmen	nl(s)
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/we	re
Dated	6 30 m	
have not been so	Price chairman of the board, president or other officer-if directed by an incorporator – if in the hands of a receiver, trustee, unted fiduciary by that fiduciary)	
	John Johnson	
	(Typed or printed name of person signing)	_
	President	_
	(Title of person signing)	- <del></del>