# F21000000723

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### **CT CORP**

#### (850) 656- 4724 3458 lakesore Drive Tallahassee, FL 32312

Da	ite:	06/24/2024	· 4:15W	
		Acc#I20160000072	- 4: ( ) = W	
Name:	Guidemark	Health, Inc.		
Document #:				
Order #:	15684145 -	8		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			~.,	
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Thank you!

#### PROFIT CORPORATION

### APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

## SECTION I (1-3 MUST BE COMPLETED)

F21000000723

	(Document num	ber of corporation (if known)		
	Guider	nark Health, Inc.		
	(Name of corporation as it appear			
Delaware		3. February 4, 2021 (Date author		
(Incor	porated under laws of)	(Date author	ized to do business in	Florida)
		SECTION II Y THE APPLICABLE CHA	NGES)	
. If the amendment changes incorporation? July 13, 20	the name of the corporation, when	was the change effected under	the laws of its jurisdic	tion of
Lumanity Creative Strateg	y and Engagement Inc.			
(Name of corporation after not contained in new name	r the amendment, adding suffix "core of the corporation)	rporation," "company," or "inco	orporated," or appropr	riate abbreviati
(If new name is unavailabl	e in Florida, enter alternate corporat	e name adopted for the purpose	e of transacting busing	
6. If the amendment cha	inges the period of duration, indicate	e new period of duration.		-3
		Mary Land		
	(1	New duration)		
101 1 1	and the state of t			
. If the amendment cha	inges the jurisdiction of incorporation	on, indicate new jurisdiction.	,	 (7)
			•••	CĐ
	(N	ew jurisdiction)		
	ed agent and/or registered office addor the new registered office addored Agent		name of the	
	(Florid	a street address)		
New Registered Office		· <u>.</u>	Florida (Zip Cod	
	•	(City)	(Zip Cod	le)
New Registered Agent's	Signature, if changing Registered	d Agent:		
I hereby accept the appoin	ntment as registered agent. I am fa	miliar with and accept the obli	gations of the position	1.
Signatu	re of New Registered Agent, if chan	eine		

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

Title/ Capacity	<u>Name</u>	Address	Type of Action
			Add
			Cemove
			Add
			L.Remove
			:
			C.COMOVC
	<del></del>		Add :
			☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
			Add
O. Attached is a co of the application	ertificate or document of similar import, even to the Department of State, by the Secretar of which it is incorporated.	idencing the amendment, author ry of State or other official havin	nticated not more than 90 days prior to deliver g custody of corporate records in the jurisdiction
		Don Williams  -5489587853874CD	
	(Signature of a director a receiver or other co	or, president or other officer - if urt appointed fiduciary, by that	fiduciary)
Jon Williams		CEO	· · · · · · · · · · · · · · · · · · ·

FILING FEE \$35.00



# Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "GUIDEMARK HEALTH, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "LUMANITY CREATIVE STRATEGY AND ENGAGEMENT INC." ON THE THIRTEENTH DAY OF JULY, A.D. 2022, AT 12:28 O'CLOCK P.M.

. . . . . . . . .



Authentication: 203775366 Date: 06-24-24

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