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(Requ	vestor's Name)			
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP		MAIL		
(Business Entity Name)				
(Document Number)				
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	ACCOUNT NO.	: I2000000195
	REFERENCE	: 24,0629 7230004
	AUTHORIZATION	: Spelle man
	COST LIMIT	: \$ 150.00
ORDER DATE :	June 4, 2018	
ORDER TIME :	12:12 PM	
ORDER NO. :	240629-010	
CUSTOMER NO:	7230004	

DOMESTIC AMENDMENT FILING

	NAME :	GCI	ACQUISITION,	LLC		NHH (
	EFFECTIVE	E DATE:				8- "U
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<u>XX</u>	ARTICLES RESTATED		NDMENT S OF INCORPO	DRATION		1:4

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY

XX PLAIN STAMPED COPY

_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER'S INITIALS:

COVER LETTER

TO: New Filing Section **Division of Corporations**

SUBJECT: Gift Card Impressions, LLC
(Name of Resulting Florida Limited Company)

The enclosed Articles of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 605.1045, F.S.

Please return all correspondence concerning this matter to:

Debra Getts, Esq.

(Contact Person)

Tobin & Reyes, P.A.

(Firm/Company)

225 N.E. Mizner Boulevard, Suite 510

(Address)

Boca Raton, FL 33432

(City, State and Zip Code)

dgetts@tobinreyes.com

E-mail Address: (to be used for future annual report notifications)

For further information concerning this matter, please call:

_at (561) 620-0656 (Area Code) (Daytime Telephone Number) Debra Getts, Esq. (Name of Contact Person)

Enclosed is a check for the following amount: (All checks processed by this office must be payable in US dollars and drawn on a bank located in the United States)

■ \$150.00 Filing Fees ■ \$155.00 Filing Fees **S**180.00 Filing Fees □\$185.00 Filing Fees, and Certificate of and Certified Copy Certified Copy, and (\$25 for Conversion Certificate of Status & \$125 for Articles Status of Organization)

STREET ADDRESS:

New Filing Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

INHS11 (7/17)

	FILEN
Articles of Conversion For	18 IUN -4 Pit 14:47
<u>"Other Business Entity"</u> Into	SECTED ANY
Florida Limited Liability Company	SECTION 7 TALLAHAUSE LOADA

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Gift Card Impressions, LLC

(Enter Name of Other Business Entity)

2. The "Other Business Entity" is a ______

(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)

First organized, formed or incorporated under the laws of _____

(Enter state, or if a non-U.S. entity, the name of the country)

October 9, 2009 on

.

(date of organization, formation or incorporation)

3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:

Gift Card Impressions, LLC

(Enter Name of Florida Limited Liability Company)

4. If not effective on the date of filing, enter the effective date:_

(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after the date this document is filed by the Florida Department of State.)

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

5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605.1006 and 605.1061-605.1072, F.S.



ARTICLES OF ORGANIZATION OF GIFT CARD IMPRESSIONS, LLC

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The undersigned subscriber to these Articles of Organization hereby forms a limited liability company under the Florida Revised Limited Liability Company Act.

ARTICLE I

The name of this limited liability company is Gift Card Impressions, LLC

ARTICLE II

The limited liability company's principal office and mailing address is:

250 Williams Street Suite 5-2002 Atlanta, GA 30303

ARTICLE III

The limited liability company's initial Registered Agent and Registered Office in the State of Florida shall be:

Corporation Service Company 1201 Hays Street Tallahassee, FL 32301-2525

THE UNDERSIGNED, for the purpose of forming a limited liability company to do business within the State of Florida, does make and file these Articles of Organization.

Corporation Service Company, Registered Agent/Authorized Agent of Member

By: _____and thomas

Name: Sarah Thomas

Title: Assistant Secretary Dated: June 4, 2018