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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: G	ry of Zion	Incorporat
DOCUMENT NUMBER: NOIOC	00006483	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
(Name of	Schultz Contact Person)	
(Firm	n/ Company)	
	te and Zipeode) d for future annual report notification	108
For further information concerning this matter, please	e call:	
Diane Schutz (Name of Contact Person)	at (321) 79 (Area Code & Day)	4-9553 time Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Departme	ent of State:
\$35 Filing Fee \$\text{Certificate of Status}\$	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporat Clifton Building 2661 Executive Cent	tions

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Gloryof	2io	a T =	ico Cpa	rated
(Name of Corporation a) currently fil			ot. of State	
(Document Number of		·		_
Pursuant to the provisions of section 617.1006, Florida the following amendment(s) to its Articles of Incorporation		is <i>Florida N</i>	ot For Profit Co	rporation adopts
A. If amending name, enter the new name of the co	rporation:			
Fusion, I	nc.			
The new name must be distinguishable and contain tabbreviation "Corp." or "Inc." "Company" or "Co."	the word "c	corporation" used in the	or "incorporate name	ed" or the
		The state of the s		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD				
		 		- 河 3 :
	_			
C. Enter new mailing address, if applicable:				2 2 2
(Mailing address MAY BE A POST OFFICE BO)	<u>X</u>)	· · · · · · · · · · · · · · · · · · ·		
				i vo
				学型 8
D. If amending the registered agent and/or registered			rida, enter the r	ame of the
new registered agent and/or the new registered o	office addre	<u>ss:</u>		
Name of New Registered Agent:			· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(Florida	street addres	(s)	
<u> </u>			, Flori	da
	(City)	(Zi	p Code)
New Registered Agent's Signature, if changing Regis				
I hereby accept the appointment as registered agent. position.	I am fan	uiliar with a	nd accept the o	bligations of the
<u>C:</u>		alakana J. A		more.
Signature	e oj ivew Ke	gisterea Agei	nt, 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)

Title <u>Address</u> Type of Action <u>Name</u> AUE/NW Add \square Remove dge Add E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: March 12, 2011
(date of adoption is required)
Effective date if applicable: as soon as possible.
(no more than 90 days after amendment file date)
•
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.
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)
(Typed or printed name of person signing)
President Secretary Director (Title of person signing)