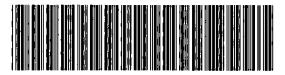
(Re	questor's Name)	
. (Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	. Certificate	of Status
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OCT 2 2 2012 T ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations	•	
NAME OF CORPORATION: GPPBC, INC		.
DOCUMENT NUMBER: N12000004565		
The enclosed Articles of Amendment and fee are subn	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Lisa Campanelli		
	(Name of Contact Person	n)
GPPBC, INC		
	(Firm/ Company)	
9793 Glades Road		
	(Address)	
Boca Raton, FL 33434	·	
	(City/ State and Zip Cod	e)
info@gppbc.com E-mail address: (to be used	for future annual report	notification
For further information concerning this matter, please	·	ioinication)
Lisa Campanelli	at (917	₎ 880-7733
(Name of Contact Person)		ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐\$43.75 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	Amend	Address Iment Section on of Corporations
P.O. Box 6327	Clifton	Building
Tallahassee, FL 32314		Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE DIVISION OF CORPORATIONS

GALBC INCOMPACTALED		12 OCT 22 AMH: 18
(Name of Corporation as currently file	ed with the Florida Dept. of State	<u>e</u>)
N12000004565		
(Document Nur	mber of Corporation (if known)	
ursuant to the provisions of section 617.1006, nendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florida Not</i>	For Profit Corporation adopts the follow
If amending name, enter the new name o	f the corporation:	
		The r
me must be distinguishable and contain the v Company" or "Co." may not be used in the v		ated" or the abbreviation "Corp." or "In
	 	
 Enter new principal office address, if app Principal office address MUST BE A STREE 		
incipal office address MOST BE A STREE	.1 ADDRESS)	
. Enter new mailing address, if applicable	<u>x</u>	
(Mailing address <u>MAY BE A POST OFFI</u>	<u>CE BOX</u>)	
If amending the registered agent and/or		da, enter the name of the
new registered agent and/or the new regi	istered office address:	
Name of New Registered Agent:		
	(Florida street address))
lew Registered Office Address:		
		, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changi	ing Pagistared Agents	
hereby accept the appointment as registered a		cept the obligations of the position.
	-	· ·

Signature of New Registered 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)

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 <math>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 Remove 2) Change VP Debbie Appleton 9793 Glades Road X Add Boca Raton, FL 3343 — Remove 9793 Glades Road Boca Raton, Fl 3343 Boca Raton, Fl 3343 X Remove 4) Change — Add — — Remove — 5) Change — Add — — Change — — Add —	Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
		<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Remove 2) Change VP Debbie Appleton 9793 Glades Road X Add Boca Raton, FL 3343 — Remove 9793 Glades Road Boca Raton, Fl 3343 Boca Raton, Fl 3343 X Remove 4) Change — Add — — Remove — 5) Change — Add — — Change — — Add —	1) Change	<u>VP</u>	Stacey Ovitt	9793 Glades Road
Change VP Debbie Appleton 9793 Glades Road	Add			Boca Raton, FL 33434
X Add Boca Raton, FL 3343 Remove Add Boca Raton, FL 3343 3) Change Add Add Add Add	X Remove			
Remove	2) Change	<u>VP</u>	Debbie Appleton	9793 Glades Road
3) Change	X Add			Boca Raton, FL 33434
Add	Remove			
X Remove 4) Change Add Add Add Add Add Add Add Add	3) Change	<u>D</u>	Henry Nunez	9793 Glades Road
4) Change	Add			Boca Raton, Fl 33434
Add Remove 5) Change	X Remove			
Remove	4) Change			
5) Change	Add			
Add	Remove			
Remove	5) Change			
6) Change	Add			
Add	Remove			
	6) Change			
Damana	Add			
Remove	Remove		Page 2 of 4	

(attach additional sheets, if necessary).	(Be specific)	ange(s) here:			
					
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The date of each amendment(s) adoption:
Effective date if applicable:
(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.
Dated 10/15/2012 Signature
(By the chairman of 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 Campanelli
(Typed or printed name of person signing)
President
(Title of person signing)