N1300008777

	(1)
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

GET SMART RÖ NAME OF CORPORATION:	bots, Inc.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Celena M. Crews	
GET SMART Robots, Inc.	(Name of Contact Person)
349 SW Crews Farm Ter	(Firm/ Company)
Lake City. Fl. 32025	(Address)
celenacrews@gmail.com	(City/ State and Zip Code)
E-mail address: (to be u	sed for future annual report notification)
For further information concerning this matter, ple	se call:
Celena Crews	386 6234413
(Name of Contact Per	
Enclosed is a check for the following amount made	payable to the Florida Department of State:
Certificate of Stati	\$\begin{align*} \$align
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GET SMART Robots, Inc.	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
N13000008777	
(Document Nur	nber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	ntes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor.	ation:
NA III	The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRES	5)
[]·	<u> </u>
[];{	5
C. Enter new mailing address, if applicable:	NA NA
(Mailing address MAY BE A POST OFFICE BOX)	
li	
K 1	P
∅.	
D. <u>If amending the registered agent and/or registered of</u>	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	address:
Name of New Registered Agents	a M. Crews
	Morning Star Gln
	(Florida street address)
New Registered Office Address	(F. 10.102 51.001 52.007)
Fort W	hite 171
<u> </u>	(City) (Zip Code)
∦ ∫	• • • • • • • • • • • • • • • • • • • •
New Registered Agent's Signature, if changing Registery I hereby accept the appointment as registered agent. I am	ed Agent:
i hereoy accept the appointment as registered agent. I am	jamular with und accept the obligations of the position.
	alim as
[1]	Signature of New Registered Agent, if changing
i 1	
W 3	

Page 1 of 4

address of each Officer (Attach additional sheets,	and/or Director b if necessary)	neing ådded:	ch officer/director being removed and title, name, and		
Please note the officer/di.	rector title by the f	first letter of the office title:	r of the office title:		
F = Fresident; V = Vice F Executive Officer: CFO = held. President, Treasure	= Chief Financial (Officer If an officer/director hold:	S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief If an officer/director holds more than one title, list the first letter of each office		
	wes the corporatio	on, Sally Smith is named the V and .	ed as the PST and Mike Jones is listed as the V. There is S. These should be noted as John Doe, PT as a Change,		
Example: X Change X Remove X Add	PT John De V Mike Je SV Sally Se	ones			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) X Change	D, P, T	Celena M. Crews	660 SW Morning Star Gln		
Add			Fort White, FL 32038		
Remove					
2) X Change	D, V	Bretti A. Crews	660 SW Morning Star Gln		
Add			Fort White, FL 32038		
Remove	D.C.		2100 SW Mouldin Aug		
3) X Change	<u>D, S</u>	Travijs A. Medeiros	108 SW Mauldin Ave Lake City, FL 32024		
Add					
Remove					
4) Change		R.J. 14.1			
Add					
Remove					
5) Change					
Add			· · · · · · · · · · · · · · · · · · ·		
Remove					
6) Change		<u> </u>			
Add					
Remove		H l			

Page 2 of 4

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E. If amending or adding additional Articles, (attach additional sheets, if necessary). (Be	inter change(s) here: Specifio)
Amend the following Articles: I, II, III, IV, V, V	
See auached Amended Articles of Incorporation	for specific changes
	Page 3 of 4



349 SW Crews Farm Ter Lake City, FL 32025 getsmartrobots@gmail.com 386.623.4413

AMENDED ARTICLES OF INCORPORATION

Article I:

The name of the corporation is: GET SMART Robots, Inc.

Article II:

The principal place of business of the corporation is: 349 SW Crews Farm Ter Lake City, FL 32025

The mailing address of the corporation is: 349 SW Crews Farm Ter Lake City, FL 32025

Article III:

The specific purposes for which the corporation has been formed are, but not limited to, as follows:

To provide a charitable avenue of support in accordance with the meaning of section 501(c)(3) for programs that inspire innovation and economic development in communities and academic excellence in schools.

Article IV:

The manner in which the directors are elected or appointed is:

As provided for in the by-laws

Article V:

The name and Florida street address of the registered agent is:

Celena M. Crews 660 SW Morning Star Gln Fort White, FL 32038

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered agent signature:



349 SW Crews Farm Ter Lake City, FL 32025 getsmartrobots@gmail.com 386.623.4413

Article VI:

The name and address of the incorporator is:

Celena M. Crews 660 SW Morning Star Gln Fort White, FL 32038

Incorporator Signature:

Article VIII:

The effective date for this corporation shall be 09/26/2013

Article IX:

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

	NA :	e a - a - a
	this document was signed.	f other than the
date	NA NA	
Effe	ective date if applicable:	
	(no m ore than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be li ument's effective date on the Department of State's records.	sted as the
Ado	option 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. 11/10/2017 Dated	
	Signature all Miles	
	(By the chairman or vice all irman 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)	
	Celena M. Crews	
	Typed or printed name of person signing)	
	President, Director	
	(Title of person signing)	