# P0300075689

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR		LE BY GREG CAN	NION, IN	C.	
	P03000075689				
DOCUMENT NUME	BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	atter to the following	<b>;:</b>		
	JOHN HOLDER				
	EXECUTIVE MANAG	Name of Contac GEMENT CONSUL		NTERNATIONAL, LLC	
		·Firm/ Comp 79999 NFEDER			
		Address BOCA RATON			
		City/ State and 2	Lip Code		
	JOHNHOLDER1@GMA	AIL.COM			
	E-mail address: (to be u	sed for future annua	l report not	ification)	
For further information	n concerning this matter, plea	se call:			
JOHN HOLDER		at (	321	508-4005	
Name	of Contact Person		rea Code &	& Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Flori	da Departm	nent of State:	
\$35 Filing Fee	\$43.75 Filing Fee & \$\sum\$\$43.75 Certificate of Status (Additional copy is	5 Filing Fee & \$\Bigs\square\$5 Certified Copy Certified Copy		g Fee Certificate of Status enclosed) is enclosed)	(Additional Copy
<u>Mai</u>	iling Address		Street Ad	dress	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

P03000075689 (Name of Corporation	as currently filed with	the Florida Dept. of State)	
(Documer	nt Number of Corporation	(if known)	<del>.</del>
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this <i>Florida Prof</i>	it Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the cor	rporation:		
			The new name
must be distinguishable and contain the word "corporat. or Co.," or the designation "Corp," "Inc," or "Co". A "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET AD			
C. Enter new mailing address, if applicable:			<del></del>
(Mailing address MAY BE A POST OFFICE BOX			
•			
D. If amending the registered agent and/or registere new registered agent and/or the new registered of		da, enter the name of the	
Name of New Registered Agent			_
	(Florida street address)		<del></del>
New Registered Office Address:	( · · · · · · · · · · · · · · · · ·	, Florida	
	(City)	(Zi <sub>l</sub>	Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		pt the obligations of the position.	er warning and the second of t
Signati	ure of New Registered Age	ent, if changing	

#### Page 1 of 4

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:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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.

Example: X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	D	WINSTON HARDISON	2695 SOUTHOVER DR NE,
xAdd			PALM BAY FL 32905
Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5)Change	_	<del>.</del>	
Add Remove			

# Page 2 of 4

	, if necessary).	(Be specific)				
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issued shares, pr	rovisions for imp	n exchange, reclass elementing the ame	ndment if not con	llation of tained in the		
	<u>lf:</u> (if not ap	pplicable, indicate N	(/A)			
		,				
N/A						
N/A						<del>=</del>
N/A						
N/A						
N/A						
N/A						

# Page 3 of 4

The date of each amendment(s) adoption:	, if other than
the date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be a document's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
X The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10/13/2014 Signature Lane	
Signature  (By a director, president or other officer – if directors or officers 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	

(Title of person signing)