Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000143232 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet:

Division of Corporations

Fax Number : (850)617-6380

From:

: EXPRESS CORPORATE FILING SERVICE INC. Account Name

Account Number : FCA000000027 Phone : (305)444-4994

: (305)444-4977 Fax Number

COR AMND/RESTATE/CORRECT OR O/D RESIGN

GSA ASSOCIATES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

ECER

2008 SS:SO

6/3/2008

302444925

June 4, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GSA ASSOCIATES, INC. 3806 SW 137 AVE. MIAMI, FL 33175

SUBJECT: GSA ASSOCIATES, INC.

REF: P04000152085

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Teresa Brown Regulatory Specialist II FAX Aud. #: E08000143232 Letter Number: 408A00034714

P.O BOX 6327 - Tullahassee, Florida 32314

(((H08000143232)))

Articles of Amendment of

Articles of Incorporation THE WASKER OF ST GSA ASSOCIATES, INC. (Name of corporation as currently filed with the Florida Dept. of State) P04000152085 (Dacument number of corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) DELETED THE PRESIDENT: ARISTIZABAL SANDRA THE NEW PRESIDENT WILL BE: TORRES ROBERTO THE NEW VICE/PRESIDENT WILL BE: MUNOZ GLORIA B 3806 SW 137 AVE MIAMI FL 33175. (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

ECER

(continued)

(((H08000143232)))

The date o	feach amendment(s) adoption: 05/23/2008
Effective d	sate if applicable: 05/23/2008
	(no more than 90 days after amendment file date)
Adoption o	of Amendment(s) (CHECK ONE)
	The amendment(s) was/were approved 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 actionand shareholder action was not required.
	The amendment(s) was/were adopted by the incorporators without shareholder action at shareholder action was not required.
	Signature Torres Roberto
	(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)
	TORRES ROBERTO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)