## P05000029617

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: <u>GARDNE</u>	R + SON (WOO	DWORKING) INC.
DOCUMENT NUMBER: <u>P0500029617</u>			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this mat	tter to the following:	
- -	SHEILA GARDNER + SOI		
		Firm/ Company	•
_	7501 142ND A	AVE LOT 52	29
		Address	
-	LARGO FL	33771 City/ State and Zip Code	,
•		City/ State and Zip Code	,
<u> </u>	Sjardner e Email address: (to be us	hot mail. consed for future annual report in	notification)
For further information	concerning this matter, pleas	e call:	
SHEILA G	ARDNER	at (727	1 455 9749
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depar	rtment 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)
Amer Divis	ing Address adment Section ion of Corporations Box 6327	Amenda Division	Address ment Section n of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P05000029617	
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
GARDNER CREATIVE	INNOVATIONS INC. The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/4
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	The second secon
C. Enter new mailing address, if applicable:	整 5 四
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	$\frac{N/A}{2}$
	2
D. 16 amount in a the market and a sent and in the section of the section of	June 1: Election and the control of the
D. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office addresses	
Name of New Registered Agent N/A	
Tham by New Heighbreau Tigetti	
(Florida s.	treet address)
New Registered Office Address: N/A	Florido
New Registered Office Address:	(City), Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Thereby accept the appointment as registered agent. Turnyammar	min and decept the congunous of the position.
N/A	Registered Agent, if changing
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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			<del></del>
Remove		,	
3 ) Change		N/A	**************************************
Add			<del></del>
Remove			
4) Change		_N/A	
Add			#-1-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Remove			
5) Change	*********	N/A	
Add			
Remove			<u> </u>
6) Change		N/A	
Add		•	
Remove			

AL /A	al sheets, if necessary). (Be sp	er change(s) here: ecific)		
M/A				
_14/14				
	Personal Control of the Control of t	<del></del>		
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f an amendme	nt provides for an exchange, re implementing the amendment	classification, or canc	ellation of issued shar	<u>·es.</u>
(if not app	implementing the amengment licable, indicate N/A)	it not contained in the	amenament itseit:	
	,			
1/4				
N/A				

The date of each amendment(s) adoption:	, if other than the
,	
Effective date <u>if applicable</u> : N/A	90 days after amendment file date)
(no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.	licable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. To by the shareholders was/were sufficient for approval.	he number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled in	
"The number of votes cast for the amendment(s) was/v	ere sufficient for approval
by(voting group)	,,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of director action was not required.  ☐ The amendment(s) was/were adopted by the incorporators was action was not required.	
Dated	- <del></del>
Signature Whans	0 1011
	ficer – if directors or officers have not been he hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciar	
A. St. 1	E ARDNER
(Typed or printe	ARDNER I name of person signing)
PRESIL	ENT
(Titl	e of person signing)