P06000127039

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SHE	S A GC INC
DOCUMENT NUMBER: P06000	0127039
The enclosed Articles of Amendment ar	nd fee are submitted for filing.
Please return all correspondence concer	ning this matter to the following:
	TAMRA DAVIS
	(Name of Contact Person)
	SHES A GC, INC
	(Firm/ Company)
4017 Caran	(Address)
	(Address)
<u>Coconut</u> C	VIC FI 33066 (City/ State and Zip Code)
For further information concerning this	
TAMRA DAVIS	at (954) 557-6865 (Area Code & Daytime Telephone Number)
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following ar	nount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Fee Certificate of State	
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 Articles of Incorporation

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TALLAHASSE	AM 10: ~
TALLAHASSE O	FLOATE
	MIDA

SHE'S A GC, INC.

(Name of Corporation as currently filed with the Florida

P06000127039

(Document 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:

A. If amending name, enter the new name of the corporation:

the new name must be atstinguishable at a comporated" or the abbreviation "Corp.," "Co". A professional corporation name association," or the abbreviation "P.A."	nd contain the word "corporati "Inc.," or Co.," or the designati e must contain the word "char	on "Corp," "Inc," or
B. Enter new principal office address, if app	licable: 4017 CARAMBOI	A CIRCLE N
Principal office address <u>MUST BE A STREE</u>		JT CREEK, FL 33066_
C. Enter new mailing address, if applicables (Mailing address MAY BE A POST OFFICE)		
		····
		, enter the name of the
D. If amending the registered agent and/or r new registered agent and/or the new regis Name of New Registered Agent:		, enter the name of the
		, enter the name of the
new registered agent and/or the new regis Name of New Registered Agent:	stered office address:	, enter the name of the

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) <u>Name</u> <u>Address</u> **Type of Action** Title _____ **D** Add ☐ Remove ☐ Add ☐ Remove _____ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an 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)

The date of each amendment(s) adoption:
Effective date if applicable: $U/19/08$
(no more than 90 ddys after amendment file date)
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.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_11-19-08
Signature Jama Davis
(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)
TAMRA DAVIS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)