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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** SOUTH BEACH ICE CREAM + FUNGER NAME OF CORPORATION: \_\_\_ P0700000 1345 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LORI NUSSBAM Name of Contact Person Firm/ Company 7800 5-W 141 57.
Address Mi Ami, FL 33154 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Lo Q1 Nrsssarva at (305) 205-8284

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & ☐ \$35 Filing Fee \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation of

55 -1 0-1	-1 500 0040	. =d==	PM
	CH TER CREAT		
(Name of Corporation as curr	_	ia Dept. of State)	
······································	00001345		
(Document Nur	nber of Corporation (if kno	own)	
Pursuant to the provisions of section 607.100 imendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	lorida Profit Corporation a	adopts the followin
a. If amending name, enter the new name o	of the corporation:		
GEMWAN	RE EVENTS,	INC.	The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc	c," or "Co". A professiona	ated" or the al corporation
3. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>			
	<u>-</u>		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
). If amending the registered agent and/or new registered agent and/or the new reg		in Florida, enter the name	of the
Name of New Registered Agent:			
New Registered Office Address:	(Florida street	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changi	ing Registered Agent:		
hereby accept the appointment as registered	agent. I am familiar with	and accept the obligations of	f the position.
	Signature of Non Pagistana	ad Agant if abanaina	

## 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) . **Title** Name Address Type of Action \_\_\_\_\_ 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:	•	6	10	
(date of adoption is required)					
Effective date if applicable:					
(1	o more than 90	) days after o	mena	dment file date)	
Adoption of Amendment(s)	( <u>CHI</u>	ECK ONE)		•	
The amendment(s) was/were by the shareholders was/were			The	e number of votes cast for the amendment(s)	
The amendment(s) was/were a must be separately provided f	approved by the	shareholder group entitle	s thro d to v	ough voting groups. The following statement yote separately on the amendment(s):	
"The number of votes cas	st for the amend	ment(s) was	/were	e sufficient for approval	
by				.,,	
by	oting group)	<u>-</u>			
The amendment(s) was/were action was not required.	adopted by the l	board of dire	ctors	without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the i	incorporator	with	hout shareholder action and shareholder	
Dated	16/10				
Signature	director preside	u .	AL	USiauro er – if directors or officers have not been	
				hands of a receiver, trustee, or other court	
	nted fiduciary by			•	
	<u></u>	ri Ni	122	ne of person signing)	
	(Тур	ed or printed	l nam	ne of person signing)	
		Preside	سرد	-	
•		person sign		•	