

PD70000042450

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/26/12--01007--004 **\$2.50

12 SEP 28 AM 8:16
FBI
DEPT. OF JUSTICE
DIVISION OF INVESTIGATION

Amend/cc
@ 9/28/12

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: G & C PRO TECH, INC.

DOCUMENT NUMBER: P07000042456

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MIRNA E. PINTO

Name of Contact Person

G & C PRO TECH, INC.

Firm/ Company

4636 RIVER GEM AVENUE

Address

WINDERMERE, FLORIDA. 34786

City/ State and Zip Code

gcprotech@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LILLIAN VEGA

Name of Contact Person

at (407)

744-3142

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 27, 2012

MIRNA E. PINTO
G & C PRO TECHM INC
4636 RIVER GEM AVENUE
WINDERMERE, FL 34786

SUBJECT: G & C PRO TECH, INC
Ref. Number: P07000042456

We have received your document for G & C PRO TECH, INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 212A00024164

Articles of Amendment
to
Articles of Incorporation
of

SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 28 AM 8:16

G & C PRO TECH, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P07000042456

(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 distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1108 PLAZA DRIVE
KISSIMMEE, FL 34743

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1108 PLAZA DRIVE
KISSIMMEE, FL. 34743

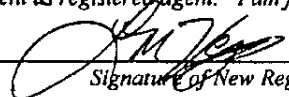
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent LILLIAN VEGA
1108 PLAZA DRIVE
(Florida street address)

New Registered Office Address: KISSIMMEE, Florida 34743
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


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 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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	D	MIRNA E. PINTO	4636 RIVER GEM AVENUE WINDERMERE, FLORIDA. 34788
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P	LILLIAN VEGA	4609 DORAL PARK AVENUE KISSIMMEE, FLORIDA. 34758
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	V	DENISE CRUZ	2609 EAGLE CLIFF DRIVE KISSIMMEE, FLORIDA. 34746
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	D	MIGUEL CRUZ	2609 EAGLE CLIFF DRIVE KISSIMMEE, FLORIDA. 34746
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	D	LUIS SANTANA	4609 DORAL PARK AVENUE KISSIMMEE, FLORIDA. 34758
<input checked="" type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

ALL SHARES OWN BY MRS. MIRNA E. PINTO WHICH ARE 100% AND WILL
BE DIVIDED AS FOLLOW LILLIAN VEGA 40%, DENISE CRUZ 40% AND
MIRNA E. PINTO 20% TO COMPLETE THE 100% OF SHARES IN COMPANY
AS TODAY 09/12/2012 IF ANY DISCREPANCY OR WITHHOLDING INFORMATION
ARE FOUND ON BEHALF OF THE SELLING PARTNER(MIRNA), THIS WILL
BE DETERMINE AS BREACH AND FOR FORFEITURE OF SAID PERCENTAGEAND CONTRACT.
WHICH INTERN WILL HAND OVER SELLING PARTNERS PERCENTAGE TO BE SPLIT
BETWEEN BUYERS LILLIAN & DENISE AND GRANT THEM FULL OWNERSHIP OF BUSSINESS.

**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: 09/12/2012

Effective date if applicable: 09/12/2012
(no more than 90 days 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):

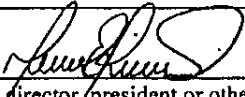
"The number of votes cast for the amendment(s) was/were sufficient for approval

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 09/12/2012

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)

MIRNA E. PINTO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)