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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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013 APR 18 AH 11: 45 BECRETARY OF STATE NLLAHASSEE, FLORIDS

APR 2:5 2013
T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GLOBAL S	YSTEMS ENTE	RPRISES INC	
	BER: P0700012204			
	of Amendment and fee are su			
		-		
Please return all corres	spondence concerning this ma	tter to the following:		
	YOLANDA E. CA	RTER		
		Name of Contact Person		
	GLOBAL SYSTE	MS ENTERPRIS	SES INC	
		Firm/ Company		
	P.O. BOX 17467			
		Address		
	CLEARWATER,			
		City/ State and Zip Code		
yca	rter@globalsyste			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
YOLANDA E	. CARTER	at (727	, 531-1498	
Name o	of Contact Person		le & Daytime Telephone Number	
Enclosed is a check for	r the following amount made	payable to the Florida Depa	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)	
	ling Address		Address	
Amendment Section Division of Corporations			Amendment Section Division of Corporations	
P.O. Box 6327 Clifton Building		Building		
Talla	ahassee, FL 32314		xecutive Center Circle ssee, FL 32301	

Articles of Amendment to Articles of Incorporation

GLOBAL SYSTEMS ENT	TERPRISES INC		
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	
P07000122041			
(Document	Number of Corporation (if k	known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fl	lorida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name	me of the corporation:		
N/A		7	The new
	ition "Corp," "Inc," or "Co	" "company," or "incorporated" or the abbo". A professional corporation name must co.A."	
B. Enter new principal office address, it	f applicable:	12395 BELCHER RD S	
(Principal office address MUST BE A STREET ADDRESS)		UNIT 355	
		LARGO, FL 33773	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O		P.O. BOX 17467	
		CLEARWATER, FL 33762	
D. If amending the registered agent and new registered agent and/or the new	registered office address:		
Name of New Registered Agent	YOLANDA E. CA	RTER	
	2999 ORCHARD	DRIVE	
	(Florida stree	•	
New Registered Office Address:	PALM HARBOR	, Florida 34684	
	(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

2013 APR 19 AB 11: 1.

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.

X Change	PT John	Doe	
X Remove	V Mike	<u> Jones</u>	
X Add	SV Sally	<u> Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>D</u>	THERESA PENN-LAVERY	9923 RIVER DRIVE
Add			GIBSONTON, FL 33534
X Remove			
2) Change	D	DR. ROBIN JACOBSON	5801 CRUISER WAY
Add			TAMPA, FL 33615
X			
3) Change	D	CLAUDIA M. LARRAIN	2012 COFFEE POT BLVD NE
Add			ST PETERSBURG, FL 33704
X Remove			
4) X Change	PTS	YOLANDA E. CARTER	2999 ORCHARD DR
Add			PALM HARBOR, FL 34684
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	(De specific)
· · · · · · · · · · · · · · · · · · ·	
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	ange, reclassification, or cancellation of issued shares,
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
THE PREVIOUS NUMBER OF	SHARES (1,000) WAS AN ERROR. THE CORRECT
NUMBER IS 10,000 NOW PRO	OVIDED AND AFFIRMED IN THIS AMMENDMENT.
	

The date of each amendment(s)	adoption: 4/12/13 (CORRECTION DATE)
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated_4/12/^	Uplano Q. Carl
(By a select	Arector, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	YOLANDA E. CARTER
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)