P08000094937

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(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	riing Oncer.	
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Amend MC



JUL 3 1 2012 T. ROBERTS



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 26, 2012

SCOTT E. MEDNICK 5700 1ST AVE N ST PETERSBURG, FL 33710

SUBJECT: GIBRALTER FINANCIAL, INC.

Ref. Number: P08000094937

We have received your document for GIBRALTER FINANCIAL, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

The document number of the name conflict is #P12000055574 - PIMSCO INC...

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.

Tina Roberts Regulatory Specialist II

Letter Number: 012A00017484

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: GIBRALTER FINANCIAL, INC.
REF NUMBER: P08000094937

To Whom it May Concern,

Let this letter serve as written authorization for Gibralter Financial, Inc. to formally change the Corporation Name to PIMSCO, Inc.

While recently Scott E. Mednick incorporated PIMSCO, Inc. (Doc #P12000055574) and then promptly dissolved the corporation, Scott E. Mednick has no intention of revoking the dissolution, therefore, releases the name of PIMSCO, Inc. to Gilbralter Financial, Inc for use to change their name to PIMSCO, Inc.

If you need anything further, please contact me at 727-579-9956.

Thank you,

Scott É. Mednick

2812 JUL 30 AH 9: 3

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Gibralter Fi	nancial, Inc.	
DOCUMENT NUM	BER: P0800009493	7	
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	Scott E. Mednick		
	Occi E. Modrilok	Name of Contact Person	
	N/A		
		Firm/ Company	
	5700 1st Ave N		
		Address	
	St. Petersburg, F	L 33710	
		City/ State and Zip Code	;
hm	ednick@pimsco.c	om	
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Holly L. Med		_{at (} 727	579-9956 de & Daytime Telephone Number
Name	of Contact Person	. Area Coo	de & Daytime Telephone Number
Enclosed is a check for	or 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

Gibralter Financial, Inc.	
(Name of Corporation as currently filed wi	th the Florida Dept. of State) Paration (if known)
208000094937	
(Document Number of Corpo	ration (if known)
ursuant to the provisions of section 607.1006, Florida Status Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following
. If amending name, enter the new name of the corpora	tion:
PIMSCO, INC.	
ame must be distinguishable and contain the word "con Corp.," "Inc.," or Co.," or the designation "Corp," "Incord "chartered," "professional association," or the abbrev	c," or "Co". A professional corporation name must
3. Enter new principal office address, if applicable:	5700 1st Ave N
Principal office address <u>MUST BE A STREET ADDRESS</u>	St. Petersburg, FL 33710
C. Enter new mailing address, if applicable:	5700 1st Ave N
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	St. Petersburg, FL 33710
. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent Holly L. Me	dnick
5700 1st A	ve N.
(F	lorida street address)
New Registered Office Address: St. Petersb	ourg , Florida 33710

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: X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	ST		Holly L. Mednick	5700 1st Ave N St. Petersburg, FL 33710
2) Change Add Remove		_	<u>. </u>	
3) Change Add Remove		_	·	
4) Change Add Remove	-	· —		
5) Change Add Remove		_		
6) Change Add Remove		_	·	

E. If amending or adding addition (attach additional sheets, if neces	sary). (Be specific,	ange(s) here.		
N/A		<u></u>		
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				<u></u>
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		.	<u></u>	
If an amendment provides for a provisions for implementing the control of the con	<u>ie amendment if not</u>	ification, or cance contained in the	ellation of issued sh amendment itself;	ares,
N/A				
				<u> </u>
<i>i</i> ,		. <u>.</u>		

The date of each amendment	(s) adoption: 6 - 20 - 12
Effective date <u>if applicable</u> :	N/A
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Jun	ne 20th, 2012
Dated	(Sur)
Signature(B	By a director, president or other officer – if directors or officers have not been
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court
ар	ppointed fiduciary by that fiduciary)
	Scott E. Mednick
	(Typed or printed name of person signing)
	President
	(Title of nerson signing)