# P10000001920

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Amend 104.14.14

#### **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: GBI Investments Inc. DOCUMENT NUMBER: P10000007920 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Peter J. Zarcone Jr. Name of Contact Person GBI Investments Inc. Firm/ Company 3225 NE 14th St Address Ocala, FI 34470 City/ State and Zip Code southwaybuildingcorp@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:  $at \ (\frac{352}{\text{Area Code & Daytime Telephone Number}})$ Peter Zarcone Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) 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 32301

Tallahassee, FL 32314

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

### **GBI** Investments

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

dment(s) to

P10000007920			
(Document Nur	nber of Corporation (if	known)	·
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this F	Torida Profit Corporation ac	lopts the following amendmen
A. If amending name, enter the new name o	f the corporation:		
name must be distinguishable and contain to "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "C	Co". A professional corpora	The new prated" or the abbreviation name must contain the
B. Enter new principal office address, if app (Principal office address MUST BE A STREE			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI			
D. If amending the registered agent and/or new registered agent and/or the new regi			ae of the
Name of New Registered Agent			
	(Florida stre	et address)	
New Registered Office Address:	(Citv)	Florida_	(Zip Code)
	(eii,y)		(B) Code/
New Registered Agent's Signature, if changi I hereby accept the appointment as registered of		ith and accept the obligation.	s of the position.
Signatur	re of New Registered 4	gent 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.

X.Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V	_	Karen Sue Zarcone	3225 NE 14th St
Add				Ocala, FL 34470
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add		_		
Remove				
5) Change				
Add		_		
Remove				
. D				
6) Change		_	H-780-1-10	
Add				·
Remove				

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)					
Remove Karen Sue Zarcone from Vice President office.					
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: 04/01/2014	if other than the
date this document was signed.	
(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 east 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_04/01/2014	
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)	
Peter J. Zarcone Jr.	
(Typed or printed name of person-signing)  President	
(Title of person signing)	