## P10000014119

(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
<b>(</b> Bu	ısiness Entity Nar	me)
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TALLNESSEE, ELCHER

SEP 2 6 2014 C. CARROTHETES

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

GCT INVEST	MENTS INC.	
DOCUMENT NUMBER:		· 
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
KARL J. SCHUMER,	ESQ.	
KARL J. SCHUMER,	Name of Contact Person P.A.	1
18851 NE 29TH AVE	Firm/ Company E., SUITE 700	
AVENTURA, FL 3318	Address 80	
	City/ State and Zip Code	2
SCHUMERLAW@AOL.C	ОМ	
E-mail address: (to be	used for future annual report	notification)
For further information concerning this matter, plea	ase call:	
KARL J. SCHUMER	305	466-1475
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	artment of State:
\$35 Filing Fee  \$25 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	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

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

FILED

GCT INVESTMENTS INC. <del>14 SEP 18 AM 10</del>: 42 (Name of Corporation as currently filed with the Florida Dept. of State) P10000014119 AND TO VARIETY OF STATE <del>tallanassie, res</del>nea (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmental actions of the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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." **18851 NE 29TH AVENUE** B. Enter new principal office address, if applicable: SUITE 700 (Principal office address MUST BE A STREET ADDRESS ) AVENTURA, FL 33180 **18851 NE 29TH AVENUE** C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SUITE 700 AVENTURA, FL 33180 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: KARL J. SCHUMER, P.A. Name of New Registered Agent 18851 NE 29TH AVE., SUITE 700 (Florida street address) **AVENTURA** 33180 New Registered Office Address: , Florida\_ (Zip Code) (City) 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.

ignature 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, nar address of each Officer and/or Director being added:

(Attach additional sheets.\(\)if necessary)

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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
Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of eac 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. 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 (Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Mike Jones, V as Remove Example:	, and Sai	ly Smith,	SV as an Add.	
X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	nith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	RA		GIANLUCA TARTAGLIA	115 MADEIRA AVENUE
Add	-			CORAL GABLES, FL 33134
Remove				
	RA		KARL J. SCHUMER, P.A.	18851 NE 29TH AVE.
2) Change		_	,	SUITE 700
Add				AVENTURA, FL 33180
Remove				***************************************
3) Change				
Remove				
4) Change				
Remove				
5) Change		, 		
Add				
Remove				
6) Change				
Add				
Remove				

Attach <i>additio</i>	or adding additional A conal sheets, if necessary				
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	<del></del>	<del></del>			
If an amandi	nent provides for an e	vahanaa reelessi	fination or conc	Mation of issued	charac
provisions f	or implementing the a	mendment if not	contained in the	amendment itse	lf:
(if not a	pplicable, indicate N/A	)			<del></del>
		<del></del> .			
		_			

The date of each amendmen		_, if other
date this document was signed	i. 09/11/2014	
Effective date if applicable:	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	es cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
<b>09/</b> Dated	11/2014 Diday 5 TRA for Corp	
Signature _		
s	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)	
	KARL J. SCHUMER, ESQ.	
	(Typed or printed name of person signing)	<del>-</del> .
	REGISTERED AGENT	
	(Title of person signing)	_