P16000077 959

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/:	State/Zip/Phon	e #)
PICK-UP	Mait Wait	MAIL
· (Busi	ness Entity Na	me)
(Docu	ıment Number	
Certified Copies	Certificate	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



400253145154

10/28/13--01007--018 **35.00



COVER LETTER

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address

> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GCIZ MANNING	5_/NC		
(Name of Corporation as currently filed with the	Florida Dept. of State)		
P10000077959			
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following ar	nendm	ent(s) to
A. If amending name, enter the new name of the corporation:			F
	<i>Th</i>	ne nev	1'
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must con "P.A."	itain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	DORAL, FLA 33178	640	12
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11501 LAKE DRÍVE # 60 DORAL, FLA 33178	402	2
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	<u>ss:</u>		
	IA KUNZIER (EDRIVE # 6402 treet address)	13 BC1	SECRE
New Registered Office Address: 1)OPAL (City	22.00	. 28 ₽	FILED TARY OF OF COSE
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar Signature of New Registered	with and accept the obligations of the position.	9:25	STAIL

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 Doe .	Ÿ
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	P	CAROliNA IZUNZIEIZ	11501 LAKEDRIVE#6402 DORAL FL 33178
2) Change	***************************************		·
Remove 3) Change	P	6unther 12 Runzler	11121 NW 89 for/Ace # 2100 DORAL FZ 33178
Add Remove			
4) Change			
Add Remove			
5) Change			
Remove			
6) Change	·.		·
Add			

The date of each amendment(s) adoption: 10 23 13 date this document was signed.	, if other than the
Effective date if applicable:	
(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	
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 (1) (23/13) Signature A (1)	
(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)	
CAROLINA RUNZIER	
(Typed or printed name of person signing)	
President	
(Title of person signing)	

Attach additional sheets, if necessary)	. (Be specific)		
ø.			
	•		
	M. 1 M. P		•
		-	
		,	4
			······································
	· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an exc	change, reclassification	, or cancellation of issued	shares,
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contain	<u>ied in the amendment itsel</u>	<u>lf:</u>
(y nor apprecion, marcure (1771)			
		А	
		<u></u>	
			
	· · · · · · · · · · · · · · · · · · ·	-	
		•	•
		·	·
		· · · · · · · · · · · · · · · · · · ·	,