P12000056178

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	(#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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03/29/13--01018--017 **43.75



"APR 0 3 2013 T. ROBERTS

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: GCM Financial Services, Inc P12000056178 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person GCM Financial Services Inc.
Firm/Company 5513 Paula Dr.

Address

Long Beach MS

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (228) 236-7844

Area Code & Daytime Telephone Number 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 enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

	Articles of Incorporation	TALL AMAS OF ST
GCM Financia	1 Sorvices Inc.	13 MAR 20 2
	ntly filed with the Florida Dept. of State)	PASE GREY! PH 3: 36
P120000561		TALLAHASSEE, FLORIDA
	ber of Corporation (if known)	FLORIDA
ursuant to the provisions of section 607,1006, I s Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corpora</i>	
If amending name, enter the new name of	the corporation:	
		The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	'Corp," "Inc," or "Co". A professional	
. Enter new principal office address, if appl		
Principal office address <u>MUST BE A STREET</u>	(ADDRESS)	
		
. Enter new mailing address, if applicable:	NF P.O.V.	
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>E BUX</u>)	
If any discount of the second		l
If amending the registered agent and/or renew registered agent and/or the new registered.		the name of the
Name of Name Desire and Assess		
Name of New Registered Agent		
	(Florida street address)	 _
	(rioriaa sireel aauress)	
New Registered Office Address:	, 1	Florida (Zip Code)
	(City)	(Zip Code)
ew Registered Agent's Signature, if changin	g Registered Agent:	
hereby accept the appointment as registered ag		igations of the position.
Signature	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, 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.

Example: X Change	<u>PT</u>	John Doe	
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
1) Change		-	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		Barth. da	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

mach additional she	eets, if necessary).	(Be speci	change(s) here: fic)			
						
						
						
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f an amendment pr provisions for impl	ovides for an exch	nange, recla	issification, or o	ancellation of	issued shares,	
	le, indicate N/A)	nument ir i	iot contained ii	tue amendine	int reserri	
GCM Fin	./ <	_ 		400	2000	Share
						377000
The share	's are d	ivide	1 as fo	Mows	0	
1 /			1 11			
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	mi Lee		holds			
<u> </u>	in Lee		110140	100	<u> </u>	
each shan						

The date of each amendment(s) adoption: 3/27//3
Effective date <u>if applicable</u> : 3/27/13
(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
(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.
Dated3/27/13
Signature Jee
(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)
Tammi Lee (Typed or printed name of person signing)
(Typed or printed name of person signing)
Secretary
(Title of person signing)