# P12000072043

Office Use Only



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# **COVER LETTER**

Division of Corp			
NAME OF CORPO	RATION: GRACEVIL	LE STOP INC	
DOCUMENT NUM	<sub>BER:</sub> P1200007204	3	
	of Amendment and fee are su		
Please return all corre	espondence concerning this ma	tter to the following:	
	CHIRAG D PATE	EL	
		Name of Contact Person	
	GRACEVILLE ST		•
		Firm/ Company	
	5463 BROWN ST	• •	
		Address	
	GRACEVILLE, F	L 32440	
		City/ State and Zip Cod	<del></del>
UИ	∕T∆∨1040@⊔∩TN	•	
<u> </u>	TAX1040@HOTN		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
CHIRAG D	PATEL	at (817_	533-1534
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment of State:
<b>\$</b> 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)
		<b>6.</b> 4	

# Mailing Address

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

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

## Articles of Amendment to Articles of Incorporation of

ED

# **GRACEVILLE STOP INC**

12 NOV -5 AM 8: 41

P12000072043		<del> </del>	SEURETARY OF TALLAHASSEE.F	LORIE
(Documer	at Number of Corporation (if k	nown)	,,,,,	
ursuant to the provisions of section 607.  S Articles of Incorporation:	1006, Florida Statutes, this Flo	rida Profit Corporatio	on adopts the following a	mendme
If amending name, enter the new na				
-	NIA		T/	ne new
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design vord "chartered," "professional associa	ation "Corp," "Inc," or "Co	". A professional cor	orporated" or the abbr poration name must con	eviation tain the
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>		Alu		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u> (		NIA		
b. If amending the registered agent an new registered agent and/or the new	v registered office address:		name of the	
Name of New Registered Agent	CHIRAG D PATE			
	5463 BROWN ST	•		
	(Florida street			
New Registered Office Address:	GRACEVILLE	. Flo	rida 32440 (Zip Code)	
	(City)	, , , , ,	(Zin Code)	

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	Address
1) Change	Р	MANJULABEN D PATEL	30 PINE HILL CIR
Add			CAMILLA, GA 31730
X Remove			
2) Change	VP	FALGUNIBEN PATEL	3725 BERMUDA RUN DR
Add			VALDOSTA, GA 31605
X Remove		• <b>-</b>	
3) Change	<u>P</u>	CHIRAG D PATEL	444 BEDFORD ST
X Add			UNIT 6R
Remove			STAMFORD, CT 06901
4) Change			
Add			-
Remove			
5) Change			
Add			·
Remove			
6) Change	<u> </u>		
Add			
Remove			

	(Be specific)
	NIA
	17111
<u></u>	
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f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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provisions for implementing the ame	ndment if not contained in the amendment itself:

The date of each amendment(s)	adoption: 10/30/2012
Effective date if applicable: 1	0/30/2012
Effective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	11/02/2012
Signature	11/02/2012 Unider of
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	CHIRAG D PATEL
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)