P12000089431

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Amend (id & Milf

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Crimson G	ator Investme	nts, Inc.
	BER: P120000896		and the second s
The enclosed Articles	of Amendment and fee are sul	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Debra S. Scott		
•		Name of Contact Persor	1
	Crimson Gator I	nvestments, Ir	IC.
	<u></u>	Firm/ Company	
	P.O. Box 96		
		Address	
	Groveland, FL	34736	
		City/ State and Zip Code	2
dol	hhia@eandenacl	kina com	
<u>ue</u> i	obie@sandspacl	ed for future annual report	notification)
	E-man address. (to be us	ed for future annual report	nottrication)
For further informatio	n concerning this matter, pleas	e call:	
Debra Scott	1	_{at (} 352	429-3600
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	rrtment of State:
■ \$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)
Ame Div P.O	cling Address endment Section dision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment Articles of Incorporation

Crimson Gator Investments, Inc. (Name of Corporation as currently filed with the Florida Dept. of State)

P12000089631

dment(s) to

(Documen	t Number of Corporation (if	known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation adopts the following ame	
A. If amending name, enter the new na	me of the corporation:		
N/A		The	
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	" "company," or "incorporated" or the abbrevi o". A professional corporation name must contai A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		8521 Firestone Circle	
		Clermont, FL 34711	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 96	
		Groveland, FL 34736	
If amending the registered agent an new registered agent and/or the nev	d/or registered office addre v registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent			
Trains of Fren Register our Tigent	8521 Firestone	Circle	
	(Florida stre	et address)	
New Registered Office Address:	Clermont	, Florida 34711	
<u>New Registerea Unice Adaress:</u>	(City)	(Zip Code)	

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> <u>Joł</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	Pres	Sam Mills	P.O. Box 96
Add			Groveland, FL 34736
Remove			
2) Change	CEO	Debra S. Scott	8521 Firestone Circle
Add			Clermont, FL 34711
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Remove			
6) Change			****
Add			
Remove			

If amending or adding additional Articolombia (Attach additional sheets, if necessary).	(Be specific)
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	·
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s)	adoption: N/A	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were acby the shareholders was/were s	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):	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
·	(voting group)	
	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
_{Dated} July 21	2014	
Signature		
select	director, president of 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)	
	Sam Mills	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	_