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JUN 22 2016 R. WHITE



## COVER LETTER

TO: Amendment Secti Division of Corpo				
	nation: Sarci			
DOCUMENT NUME	BER: <u>P1200</u>	0103704		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	tter to the following:		
	John Ga	r20N		
•		Name of Contact Person	]	
	0.000 56	Firm/ Company	CI 22-2 C	
-	LOROK 31	Hallanda (	e FL 3300&	
		Addiess		
-	SCE above	City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
	3160			
garconn 3 @ 9mail. (om Ge-mail address: (to be used for future annual report notification)				
		·	•	
For further information	concerning this matter, pleas	e call:		
John E	larton	at ( 98 Y	, 681-7241	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)	
	ing Address		Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

FILEU

## Articles of Amendment to Articles of Incorporation

16 JUN 16 PM 3: 19
-SECRETARY PT TALLAHASSEE PLIMES

C 1 4 +	PALL AHASSES ALL MANA
Gatcon Inc. (Name of Corporation	
(Name of Corporatio	on as currently filed with the Florida Dept. of State)
P12000 103 704	
(Docum	nent Number of Corporation (if known)
rsuant to the provisions of section 607.1006, Florida Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the con	rporation:
Garcon Studios Co.	The new
ame must be distinguishable and contain the word	d "corporation," "company," or "incorporated" or the abbreviation " "Inc," or "Co". A professional corporation name must contain the
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADD	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	x)
, ,	
If amending the registered agent and/or registered new registered agent and/or the new registered of	ed office address in Florida, enter the name of the
	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Name of New Registered Agent	
<del></del>	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Office Address:  New Registered Agent's Signature, if changing Reginative accept the appointment as registered agent.	(City) (Zip Code)
Signa	ature 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 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>	John Do	2	
X Remove	<u>v</u>	Mike Jor	<u>nes</u> .	
X Add	<u>sv</u>	Sally Sm	<u>.</u> iith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change				
Add				<del></del>
Remove				
2) Change				
Add				
Remove				
3) Change		_		<del></del>
Add				·
Remove				· · · · · · · · · · · · · · · · · · ·
4) Change				
Add		<del></del>		
Remove				
5) Ohanna				
5) Change	<del> </del>	<del></del>		
Add				
Remove				
6) Change		<del></del> .		
Add				
Remove				

	(Be specific)
rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
an amendment provides for an exch royisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the amei	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depart	ock does not meet the applicable statutory filing requirements, this artment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ted by the shareholders. The number of votes cast for the amendmenticient for approval.	nt(s)
	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/were adopt action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated	Ae /13, 2016	
Signature		
	ctor, president or other officer - if directors or officers have not be	
	by an incorporator — if in the hands of a receiver, trustee, or other of fiduciary by that fiduciary)	ourt .
_	Tohn Garzon (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
_	President (Title of person signing)	·····
	(Title of person signing)	