P1300002a907

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SECRETARY OF STATE ALLAHASSEF FINERAL

JUN 14 2013

T. LEMIEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Thinkspot,		
DOCUMENT NUMBER: P1300002290) (·
The enclosed Articles of Amendment and fee are st	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Michelle Dennar	d	·
	Name of Contact Person	1
Thinkspot, Inc.		
,	Firm/ Company	
113 S. Monroe S	Street	
	Address	•
Tallahassee, FL	32301	
	City/ State and Zip Code	e
michelle@thinkspot.	СО	
E-mail address: (to be u	sed for future annual report	notification)
For further information concerning this matter, plea	ase call:	
Michelle Dennard	at (850	322-8566
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of

I ninkspot, inc.			
(Name of Corporation as curr	ently filed with the Flo	orida Dept. of State)	
P13000022907			
(Document Nu	mber of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	, Florida Statutes, this F	Clorida Profit Corporation adopts the follow	ving amendment(s) t
A. If amending name, enter the new name of N/A	of the corporation:		
name must be distinguishable and contain a "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "C	Co". A professional corporation name mu.	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		N/A	 .
	,		_
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		N/A	
D. If amending the registered agent and/or	registered office addre	ess in Florida, enter the name of the	<u> </u>
new registered agent and/or the new reg			
Name of New Registered Agent N/	Α		
	(Florida stree	et address)	
New Professor LOGO - Allinson	1	,	
New Registered Office Address:	(City)	, Florida(Zip Code)	
New Registered Agent's Signature, if chang		ith and accept the obligations of the positions of the po	SE CRE

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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	<u>V</u>	Stephanie Gibbons	113 S. Monroe St
Add			Tallahassee, FL
Remove			32301
2) Change	ST	Michelle Dennard	113 S. Monroe Street
X Add			Tallahassee, FL
Remove			32301
3) Change			
Add			<u> </u>
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove		•	
6) Change			
Add			
Remove			

E. If amending or adding addition (Attach additional sheets, if necessity)	nal Articles, enter char	nge(s) here:	
	essary). (Be specific)		
N/A			
•			
		· · · · · · · · · · · · · · · · · · ·	
			
,			
		· · · · · · · · · · · · · · · · · · ·	
E. If an amandment answides for		:	-6!
F. If an amendment provides for provisions for implementing	the amendment if not c	contained in the amend	ment itself:
(if not applicable, indicate	N/A)	······································	
N/A			
	<u> </u>		

The date of each amendment(s)	adoption: 13, 2013
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were as 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 cas	st for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/were action was not required.	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	rune, 14, 7013
Signature	Microse Dennared
select	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)
	Michelle Dennard
	(Typed or printed name of person signing)
	Secretary-Treasurer
	(Title of person signing)