## P14000 0a0 749

(Requestor's Name)	_
(Address)	
( and the second	
(Address)	
(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Dusiness Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	
	_
Special Instructions to Filing Officer:	
	ĺ
	İ
	┙

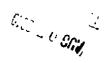




200331593342

08/02/19--01013--009 \*\*35.00

FILED
2019 AUG -2 PO IN 2019
SECRETARY OF STATE



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: GUN SHOW TEA	.M		
	BER: P14000020749			
The enclosed Articles	of Amendment and fee are su	ıbmitted for filin	g.	
Please return all corre	spondence concerning this ma	tter to the follow	ring:	
	LANA KLAVANS			
		Name of Cor	ntact Perso	ח
		Firm/ Co	ompany	
	1700 N DIXIE HWY SUITE	. 147		
	BOCA RATON, FL 33432	Addı	ess	
		City/ State ar	d Zip Cod	e
MAR	KETINGTEAMPLUS@GM/	AIL.COM		
	E-mail address: (to be us	sed for future and	iual report	notification)
For further information	n concerning this matter, pleas	se call:		
JAY KING		9 at (	54	4516886
Name o	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Fl	orida Depa	urtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filir Certified Co (Additional of enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Ission 6327 Issaee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

GUN SHOW TEAM, TIC.				
(Name o	of Corporation as currently f	iled with the Florida Der	ot. of State)	
P14000020749				
	(Document Number of C	orporation (if known)		<del></del>
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Flo</i>	orida Profit Corporation :	adopts the followin	ig amendment(s
A. If amending name, enter the new na	ame of the corporation:			
MARKETING TEAM PLUS. INC.				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	". A professional corpor	porated" or the a ration name must	bbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		<del>-</del>		<del></del>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of				
D. If amending the registered agent an new registered agent and/or the nev		s in Florida, enter the na	me of the	
Name of New Registered Agent	LANA KLAVANS			-
	(Florida street	address)		_
V D : 100	i ionaa mee	come con y		
New Registered Office Address: •	(Ci	ty)	_, Florida(Zip (	Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe  A	ered agent. I am familiar with		SECRETARY CALAHASSEE	TILE
O	Signature of New Regi	istered Agent, if changing	OF STATE	O:

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Chairman or Clerk

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 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 Chan, 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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	LANA PULLES	1700 N DIXIE HWY STE 147
Add			BOCA RATON, FL 33432
X Remove			
2) Change	P	LANA KLAVANS	1700 N DIXIE HWY STE 147
X Add			BOCA RATON, FL 33432
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)
CHANGING COMPANY NAME FROM GUN SHOW TEAM TO MARKETING TEAM PLUS
CHANGING P NAME FROM PULLES TO KLAVANS
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
•

The date of each amendment(s) addate this document was signed.	option:	if other than 1
-		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will no partment of State's records.	t be listed as t
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast f	For the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder	
O7/31/209 Dated Signature (By a diselected appoint	rector, president or other officer – if directors or officers have not been it, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	LANA KLAVANS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	