P14000026837

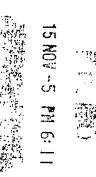
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	» #)
PICK-UP	WAIT	MAIL
(Ви	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	-

Office Use Only



500278593185

11/05/15--01028--006 **35.00



NOV 0 6 2015 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GIMMIEINFO.CO	OM, INC.	
DOCUMENT NUME	D14000024027		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	AMY OGAN		
•		Name of Contact Perso	on .
	GIMMEINFO.COM, INC.		
•		Firm/ Company	
	39308 TREELINE DRIVE		
•		Address	
	LADY LAKE, FLORIDA 32	2159	
•		City/ State and Zip Cod	le
For further information	concerning this matter, pleas	sed for future annual report se call:	nouncation)
LINDA DENBY		at (352	430-1326
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clitton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, Fl. 32301

Articles of Amendment to Articles of Incorporation of

GIMMIEINFO.COM, INC.			egita di k	9	
(Name	of Corporation as current	ly filed with the Florida Dept. of State)	1 (4 sq.		
P14000026837	_				
	(Document Number of	of Corporation (if known)	·		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the follo	wing amer	dmen	l(s) to
A. If amending name, enter the new na	me of the corporation:				
GIMMEINFO.COM, INC.			The	new	
	ation "Corp," "Inc," or '	on," "company," or "incorporated" or the "Co". A professional corporation name mu"P.A."			
D. Enter new principal office address	if annlinghler	N/A			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)					
				_ -	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	cable: OFFICE ROY)	N/A			
(mailing data ess mai bu a 1001)	<u>JITICE BOX</u>		******		
D. If amending the registered agent an new registered agent and/or the new					
new registered agent and/or the nev	N/A	<u>3.</u>			
Name of New Registered Agent	N/A				
	(Florida st	reet address)			
New Registered Office Address:	N/A	. Florida			
Hen Hegistered Office Hainess.			Zip Code)		
New Registered Agent's Signature, if c					
I hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position	0 n .		
	Signature of New I	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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove		-	
		·	
5) Change			
Add		-	
Remove		-	
6) Change			
Add		_	
Remove			

N/A					
			•		
					
	· · · · · · · · · · · · · · · · · · ·				
	<u> </u>				
			· -		
			<u> </u>		
					
provisions for	nt provides for an exc implementing the am licable, indicate N/A)	hange, reclassificendment if not co	cation, or cancella ontained in the am	tion of issued shares endment itself:	ia.
N/A					
					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	ill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Daw Male	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
DANIEL C. WEBER	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	 -