P15000029442

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GC WORKS, INC				
DOCUMENT NUME	P15000020442				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	JOHANNA CHAVEZ				
		Name of Contact Person	1		
	GC WORKS. INC				
•	<u> </u>	Firm/ Company			
	1801 SW 3RD AVE #700				
	Address				
	MIAMI, FL .33129				
		City/ State and Zip Cod	e		
BID@	GCWORKSFL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
JOHANNA CHAVEZ		786 at (9420313		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r 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 Clifton	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILET: SECRETARY OF STATE DIVISION OF CORFORATION

GC WORKS, INC.

2016 JUN 30 PM 1:56

(Name o	of Corporation as current	ly filed with the Florida Dept. of State)
P15000029442		
•	(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
P Entar nam principal office address	if applicable.	N/A
3. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
		
C. Enter new mailing address, if appli	icable:	NI/A
(Mailing address MAY BE A POST		N/A
 If amending the registered agent an new registered agent and/or the new 		
	LANCE WAYNE	-
Name of New Registered Agent	1801 SW 3RD AVE #700	
		reet address)
	MIAMI	33129
New Registered Office Address:		(City) , Florida (Zip Code)
		(Ell) (Ell)
New Registered Agent's Signature, if c		
hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the position.
	1	
7	ance all	Unl.
		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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	PD	JOHANNA CHAVEZ	2400 SW 26TH LANE	
Add			MIAMI, FL 33133	
X Remove				
2) X Change	PD	LANCE WAYNE	1801 SW 3RD AVE # 700	
Add			MIAMI, FL 33129	
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	1
(if not applicable, indicate N/A)	,
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	,

	loption:	SECKETARY OF STAN E
date this document was signed.		DIVISION OF CORPORATIO
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	2016 JUN 30 PM 1:5
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, the partment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendr fficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following st 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 add action was not required.	opted by the board of directors without shareholder action and share	cholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and sharehold	ler
DatedSignature	ance Woulne.	
(By a d selecte	irector, president or other officer – if directors or officers have not d, by an incorporator – if in the hands of a receiver, trustee, or othe ted fiduciary by that fiduciary)	
	LANCE WAYNE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	