## P15000032232

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Gallito Enterprises	s, Inc.	
DOCUMENT NUMBER: P15000032232		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Stanford G. Buckowich		
	Name of Contact Perso	n
<del></del>	Firm/ Company	
8485 Coral Dr		
	. Address	
Fort Myers, FL 33967		
	City/ State and Zip Cod	e
E-mail address: (to be u	sed for future annual report	notification)
Francis Comments		
For further information concerning this matter, plea	se call:	
Stanford G Buckowich	at ( <u>239</u>	994-4006
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	irtment 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		Address ment Section
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Gallito Enterprises, Inc.	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P15000032232	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	TO PA
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	8485 Coral Dr
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33967
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 369
	Estero FL, 33929
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the
new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
Signature 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.

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	V CFO	Cari L. Buckowich	8485 Coral Dr
X Add			Fort Myers, FL 33967
Remove			
2) X Change	P CEO	Stanford G. Buckowich	8485 Coral Dr
Add			Fort Myers, FL 33967
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			44.4
Remove			
5) (1			
5) Change			
Add			
Remove			
6) Change			
Add			•
Remove			

	(Be specific)
<u> </u>	
<u> </u>	
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A) Change Stanford G. Buckowich holding 50	ondment if not contained in the amendment itself:  O% shares
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provisions for implementing the ame	ondment if not contained in the amendment itself:  O% shares
provisions for implementing the ame (if not applicable, indicate N/A) Change Stanford G. Buckowich holding 50	ondment if not contained in the amendment itself:  O% shares

The date of each amendment(s) ad late this document was signed.	option:	, if other than t
Effective date <u>if applicable</u> :	•	
·······	(no more than 90 days after amendment file date)	
lote: If the date inserted in this bocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as t
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmental flicient for approval.	ent(s)
	roved by the shareholders through voting groups. The following stai each voti <del>ng group</del> entitled to vote separately on the amendment(s):	lement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareh	older
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	r
7/31/2015 Dated		
Signature	Shelin	
selected	rector, 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 ed fiduciary by that fiduciary)	
	Stanford G. Buckowich	
	(Typed or printed name of person signing)	<del>-</del>
	President	

(Title of person signing)