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Amend

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: PGS GUIT	ERS, INC
NAME OF CORPORATION: PGS GUIT DOCUMENT NUMBER: P15000 619	<u> 192</u>
The enclosed Articles of Amendment and fee are submitted for fi	ling.
Please return all correspondence concerning this matter to the foll	owing:
PATRICIA- Name of C	POLIARI Contact Person
ADVANCE FINA	NUIL SERVICE
12534 WILES E	• •
E-mail address: (to be used for future	and Zip Code  gutters and Live  annual report notification)
For further information concerning this matter, please call:	
Patricia Pollari at Name of Contact Person	, 994 , 255-3848
Enclosed is a check for the following amount made payable to the	Florida Department of State:
S35 Filing Fee S43.75 Filing Fee S S43.75 F  Certificate of Status Certified (Addition enclosed)	Copy Certificate of Status al copy is Certified Copy
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Ra	15 CTUTTE	RS, INC			
(Name of Corpo	ration as currently	filed with the Flori	da Dept. of State	010	~
P150	000619	92		700 Y	:
(De	ocument Number of C	Corporation (if know	vn)	7.5	م
ursuant to the provisions of section 607.1006, Fl s Articles of Incorporation:	orida Statutes, this F	lorida Profit Corpoi	ration adopts the f	Collowing Spriend	men
If amending name, enter the new name of the	ne corporation:			The n	3 6
nme must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Cord "chartered," "professional association," or	orp, " "Inc," or "C	o". A professional	"incorporated" of corporation nam	r the abbreviat	ion the
Enter new principal office address, if applic	able:				
Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u> )				-
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>: BOX</u> )		NR		- - -
. If amending the registered agent and/or reg new registered agent and/or the new registe		ss in Florida, enter	the name of the		_
Name of New Registered Agent					
			1		
New Registered Office Address:	(Florida stree	t address)	, florida_		_
	"	'ity)	$^{\prime}$	(Zip Code)	
ew Registered Agent's Signature, if changing hereby accept the appointment as registered age		th and accept the ob	ligations of the po	osition.	
	Signature of New Res	vistered Agent, if cha	เกษากษ		

## 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: $\underline{X}$ Change	<u>PT</u> <u>John</u>	<u>Doe</u>	
$\underline{X}$ Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u> .	<u>Addres</u> s
1) Change	VP	DENICE MINHALL	2324 VINTAGE DRIVE LIGHTHOUSE POINT, FL 3301
Add			LIGHTHAUSE POINT, FL 3301
Remove			<del></del>
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			<del> </del>
4) Change			<del></del>
Add			<del></del>
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	rticles, enter change(s) here: ). (Be specific)
<del></del>	
	\ /
	•
	<del></del>
an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
(ij noi appucame, mateute wsi)	
<del></del>	
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	` \ <b>\</b> X

•		
The date of each amendment(s) adoption:date this document was signed.	7/9/18	, if other than the
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file	e date)
Note: If the date inserted in this block does document's effective date on the Department o		rements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the approval.	he amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	he shareholders through voting groups. The foreign group entitled to vote separately on the ame.	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	"	
hr	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action	and shareholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and	shareholder
selected, by an inc	esident or other officer – if directors or officers corporator – if in the hands of a receiver, trustery by that fiduciary)	have not been e, or other court
	PAUL MIKHAIL (Typed or printed name of person signing)	
	(Title of person signing)	