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JUL 21 2016

C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	TION: Gues	stwings	Corporat	ian	
DOCUMENT NUMBER	k:				
The enclosed Articles of A	mendment and fee are sul	bmitted for filing.	ح ح	90R	GOALIS
Please return all correspon	Terri o	Name of Contact Person Wings (8) Firm Company		ค่	VISE ITLE- DPING RESIDENT to CEO.
***************************************	E-mail address: (to be up	City/ State and Zip Code	S. Com Jotification)	_	
For further information co	ncerning this matter, pleas	e call:			
Jerri Sh Name of C	ontact Person	at (612 Area Coo	de & Daytime Telephone	63 Number	
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	rtment 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)		
<u>Mailing</u>	Address	Street .	Address		

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

FILED SECRETARY OF STATE DIVISION OF CORPORATION-

of 2016 JUL 14 PM :	
2010 JUL 14 PM	2: 49
Guest Wings Corporation	L. 47
(Name of Corporation as currently filed with the Florida Dept. of State)	
Pllepppo36650	
(Document Number of Corporation (if known)	
(Document Number of Corporation (It known)	
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amers Articles of Incorporation:	ndment(
. If amending name, enter the new name of the corporation:	
The	new
ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevi Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contai ord "chartered," "professional association," or the abbreviation "P.A."	
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
•	
	
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	
Name of New Registered Agent	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (Zip Code)	
ew Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar 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.

X Change	PT John l	Doe	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PCEB	Terri Shapiro	1799 MINTANA AVE NE ST PETE FL 33703
Add		·	ST PETE FL 33703
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	· \$100 -
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
	•
	·

The date of each amendment(s) adoption:	SECONT TO HE TO THE TANK THE TANK THE
date this document was signed.	HVISTON OF CORPORATION
Effective date if applicable:	2016 JUL 14 PM 2: 49 days after amendment file date)
(no more than 90 t	says after amenament file date)
Note: If the date inserted in this block does not meet the applicat document's effective date on the Department of State's records.	ole statutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The n by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders througe must be separately provided for each voting group entitled to vo	
"The number of votes cast for the amendment(s) was/were	sufficient for approval
by	99
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors w action was not required.	ithout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators withou action was not required.	at shareholder action and shareholder
Dated Sulu 12, 2016 Signature Mapus	
(By a director, president or other officer	
appointed fiduciary by that fiduciary)	nands of a receiver, trustee, or other court
Terri V	Shapiro
	me of person signing)
President	
(Title of	person signing)