

(Requestor's	s Name)
(Address)	
(Address)	<u></u> ;
(City/State/2	Zip/Phone #)
PICK-UP	MAIT MAIL
(Business E	ntity Name)
(Document	Number)
Certified Copies Co	ertificates of Status
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JUN 15 2017. R. WHITE 17 JUN 15 PH 2: 07



May 16, 2017

BEN GARLAND 595 NW 64TH ST #4 MIAMI, FL 33150

SUBJECT: GARLAND CONVENIENT STORE INC

Ref. Number: P17000015706

We have received your document for GARLAND CONVENIENT STORE INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 217A00009810

Rebekah White Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: GARLAND CONVENIENT STORE INC DOCUMENT NUMBER: 112000015706
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BEN GARLAND  Name of Contact Person  GARLAND CONVENTENT STORE INC.  Firm/ Company  S95 NW 6 4 TH STREET # 4  Address  M. A. J.
Name of Contact Person
GARLAND CONVENTENT STORE INC.
Firm/ Company
595 NW 64" STREET #4
Address
Address  MAMI / F 33 50  City/ State and Zip Code
City/ State and Zip Code
BENGARLAND 96 CGMAN. GOM E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BW GARCAWD at (754) 273.091 ( Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\frac{\mathbb{Z}_{\text{\chi}} \\$35 Filing Fee \text{\chi} \ \text{Certificate of Status} \ \text{Certified Copy (Additional copy is enclosed)} \text{\chi} \text

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

17 MAY 16 PM 12: 23

## Articles of Amendment

## to Articles of Incorporation

17 JUN 15 PM 2: 07

to

GARLAND CONVENIENT STOR	E INC
	tly filed with the Florida Dept. of State)
<i></i>	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporati "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:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	4/1
•	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	A/A
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	
Name of New Registered Agent	· ·
1	3/17
(Florida st	reet address)
· ·	ver audi cany
New Registered Office Address:	(City) , Florida (Zip Code)
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	<b>:</b>
I hereby accept the appointment as registered agent. I am familiar	
. (	10
Signature of New 1	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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
<u>X</u> Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	PT BENGARLAND	S95 NW 64 STREET #4
Add		MAMI, FL 33150
Remove	•	
2) Change	PT ELANIA HOPE	106 NW 71 STREET
X Add		M. Am, F 33/60
Remove		
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		<u> </u>
Add		
Remove		

f amending or adding additional Attach additional sheets, if necessar	y). (Be specific)	C(B) HOLC.			
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an amendment provides for an e	achange, reclassifica	ition, or cance	llation of issued	l shares.	
an amendment provides for an e provisions for implementing the a	mendment if not con	tained in the s	imendment itse	lf:	
(if not applicable, indicate N/A	)				
NIA	·				
				······································	
		<u> </u>			

The date of each amendment(s) adoption: 5/15/2017	, if other than the
date this document was signed.	
Effective date if applicable: 3/16/2017	
(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)	
(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 Duland By a director, president or other officer – if directors or officers have not been	
(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)	
BEN GARLAND	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	