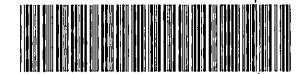
P17000061505

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	· #)
☐ PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		

Office Use Only



600304786676

C. GOLDEN 0CT 3 1 2017 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 889697 8144876

AUTHORIZATION

COST LIMIT :(/\\$_35.00

ORDER DATE: October 30, 2017

ORDER TIME : 3:45 PM

ORDER NO. : 889697-005

CUSTOMER NO: 8144876

DOMESTIC AMENDMENT FILING

NAME: GSHUSTER, INC.

EFFECTIVE DATE:

XXX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER'S INITIALS:

Articles of Amendment to Articles of Incorporation of

Eliter

GSHUSTER, INC.	2017 OCT 30 AM 10: (
(Name of Corporation as current)	ly filed with the Florida Dept. of State)
P17000061505	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
If amending name, enter the new name of the corporation:	
	The new
name must he distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation "	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	1300 N, FLORIDA MANGO RD. #14
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	WEST PALM BEACH, FL 33409
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1300 N. FLORIDA MANGO RD. #14
	WEST PALM BEACH, FL 33409
 If amending the registered agent and/or registered office adding registered agent and/or the new registered office address 	
Name of New Registered Agent	
Name of New Registered Agent	
(Florida str	reet address)
New Revistered Office Address:	. Florida
	(City) (Zip Code)
New Registered Office Address:	, Florida
Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent. I am familiar s	with and accept the obligations of the position.
Vineature of New I	Registered Agent, if changing

			and a state and a sum of such officer	director being removed and title name and
Address of each Officer Attach additional sheets, Please note the officer/di P = President; V = Vice Executive Officer; CFO weld. President, Treasure Changes should be noted to change, Mike Jones lea Mike Jones, V as Remove	and/or D , if necess rector titl President = Chief i er, Directo t in the fo wes the c	Frector besary) The by the fit; T= Tree Financial Financial Howing memoration	eing added: irst letter of the office title: isurer; S= Secretary; D= Director; TR= T Officer. If an officer/director holds more be PTD. anner. Currently John Doe is listed as the n, Sally Smith is named the V and S. These	fustee; C = Chairman or Clerk; CEQ = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change.
Example: X_Change	<u>PT</u>	John De	<u>x'</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>SV</u>	Sally Su	n <u>ith</u>	
Type of Action Check One)	Title		Name	Address
) X Change	PD	_	GREG M SHUSTER	1300 N, Florida Mango Rd., #14
Add				W b-l- D
Remove				West Palin Beach, FL 33409
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	•			<u> </u>
Add				· ·

Remove

ch additional sheets, if necessary).	(Be specific)				
					,
		-			1
				<u> </u>	
					
				<u> </u>	
				 	
					\
	 				
·-					
					
					
					1
amendment provides for an exchisions for implementing the ame	ndment if not conta	ined in the amen	iment itself:		
(if not applicable, indicate N/A)					
			- · · · · · · · · · · · · · · · · · · ·		
					
				 .	
	<u> </u>				
		- · 		_	

date this document was sig	•	
Effective date <u>if applicab</u>	le: 10/27/2017 (no more than 90) days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements, this date will on the Department of State's records.	I not be listed as t
Adoption of Amendment((S) (CHECK ONE)	
The amendment(s) was, by the shareholders was	/were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.	
☐ The amendment(s) was must be separately pro	were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):	
"The number of v	rotes east for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	;
☐ The amendment(s) was action was not required	/were adopted by the board of directors without shareholder action and shareholder.	·
The amendment(s) was action was not required	Avere adopted by the incorporators without shareholder action and shareholder.	
Dated	10/27/2007 Ery m Sterf	
Sionatur	" Gry m stert	
Signatu.	(By a director president or other officer - if directors or officers have not been sciented, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Greg M. Shuster	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	