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2018 FEB 28 P F WI SECRETARY OF STATE TALLAHASSEE, FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N: <u>GETAPI</u>	LACE, COM, IN	С,
DOCUMENT NUMBER: _		0016715	
The enclosed Articles of Ame	endment and fee are su	bmitted for filing.	
Please return all corresponder	nce concerning this ma	tter to the following:	
	PAUL	SERLUCO	
		SERLVCO Name of Contact Person	n
		Firm/ Company	
	50	Odo CLARH Address	ROAD SUITE 148
	S	A RASOTA FL City/ State and Zip Cod	34233
		Ulserluco e g	
For further information conce		•	notineation)
PAUL SERL	uco	at ( 407	) 408-7019 de & Daytime Telephone Number
Name of Cont	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made	payable to the Florida Depa	artment of State:
_	\$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)
Mailing Ac			Address
Amendmen			Iment Section
P.O. Box 6	Corporations		on of Corporations Building
Tallahassee			xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of	
GETA PLACE, CO	M. INC.
(Name of Corporation as currently	filed with the Florida Dept. of State)
P1800001	6015
(Document Number of	
·	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	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> )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amonding the unintered area and to reciptored affine	in Chaide and the court of the
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Fiorida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	, Florida
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	
	AKO TO TO
	ASS 2
Signature of New Re	gistered Agent, if changing
Signature of New Ne	ARCT B 28 ARCT S S S S S S S S S S S S S S S S S S S
	>

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>	Address
1) Change	<u>S</u>	PAUL SERLUCO	5020 CLARH ROAD
_ <b>X_</b> _ Add			SUITE 142
Remove			SARASOTA FL 34233
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NA)		r adding additional Art nal sheets, if necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:		<del></del>				<del></del>	
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provisions for implementing the amendment if not contained in the amendment itself:							
(if not applicable, indicate N/A)	r an amenum provisions fo	ent provides for an exc r implementing the am-	<u>hange, reclassifi</u> endment if not c	cation, or cancel contained in the a	lation of issued sh mendment itself:	iares,	
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The date of each amendment(s) adoption: _ date this document was signed.	FEBRUARY 23, 2018	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this	date will not be listed as the
Adoption of Amendment(s) (C	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 amendme approval.	m(s)
	he shareholders through voting groups. The following state of group entitled to vote separately on the amendment(s):	rment
"The number of votes east for the am	endment(s) was/were sufficient for approval	
by	oting group)	
The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and shareho	older
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	
Dated2/23	118	
selected, by an in	esident or other officer. Schirotors or officers have not be corporator if it the hands of a receiver, trustee, or other or ty by that fiduciaty)	
-6	ABRIAN FRANCOIS (Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	