P24 0000 33353

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000284932 3)))

H240002849323ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

```
To:
        Division of Corporations
        Fax Number      : (850)617-6380

From:
        Account Name    : LEGALZOOM.COM INC.
        Account Number  : I20010000062
        Phone           : (323)962-8600
        Fax Number      : (323)389-0502
```

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN
GAMMZ GUTTERS INC.

Certificate of Status	0
Certified Copy	1
Page Count	07
Estimated Charge	$43.75

Electronic Filing Menu   Corporate Filing Menu   Help

FILED 2024 AUG 26 AM 9:23 SECRETARY OF STATE TALLAHASSEE, FL

RECEIVED

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: __GAMMZ GUTTERS INC._____

DOCUMENT NUMBER: __P24000033353_____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mike Town
_____
                   Name of Contact Person

LegalZoom.com, Inc.
_____
                   Firm/ Company

9900 Spectrum Dr
_____
                   Address

Austin, TX 78717
_____
            City/ State and Zip Code

gammzgutters@gmail.com
_____
    E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Town _____ at (__800__) __773-0888 ext. 9724__
      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:

☐ $35 Filing Fee   ☐ $43.75 Filing Fee &   ■ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
                 Certificate of Status   Certified Copy   Certificate of Status
                                     (Additional copy is   Certified Copy
                                     enclosed)   (Additional Copy
                                                        is enclosed)

Mailing Address   **Street Address**
Amendment Section   Amendment Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                 Tallahassee, FL 32303

FILED 2024 AUG 26 AM 9:23 SECRETARY OF STATE TALLAHASSEE, FL

Articles of Amendment
to
Articles of Incorporation
of

GAMMZ GUTTERS INC.

_____

(Name of Corporation as currently filed with the Florida Dept. of State)

P24000033353

_____

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

GAMMZ inc.   *The new*

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp."
"Inc.," or "Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word
"chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. 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 _____

_____
(Florida street 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 with and accept the obligations of the position.

_____
Signature of New Registered Agent, if changing

Check if applicable
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change	_____	_____	_____
___ Add			_____
___ Remove			_____
2) ___ Change	_____	_____	_____
___ Add			_____
___ Remove			_____
3) ___ Change	_____	_____	_____
___ Add			_____
___ Remove			_____
4) ___ Change	_____	_____	_____
___ Add			_____
___ Remove			_____
5) ___ Change	_____	_____	_____
___ Add			_____
___ Remove			_____
6) ___ Change	_____	_____	_____
___ Add			_____
___ Remove			_____

E. **If amending or adding additional Articles, enter change(s) here:**
   (Attach *additional sheets, if necessary*)   *(Be specific)*

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

2024 AUG 26 AM 9: 23
TALLAHASSEE, FL

FILED

F. **If 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 N/A*)

_____

_____

_____

_____

_____

_____

_____

_____

08/09/2024

The date of each amendment(s) adoption: _____ , if other than the
date this document was signed.

Effective date if applicable: _____

(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 will not be listed as the
document's effective date on the Department of State's records

Adoption of Amendment(s)   (CHECK ONE)

☑ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder
action was not required.

☐ 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)

Dated ___8-9-2024___

Signature _____
        (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)

        Julie M Zito
        _____
        (Typed or printed name of person signing)

        President
        _____
        (Title of person signing)