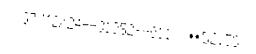
## P2400040919

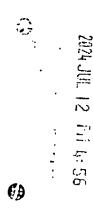
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	Certificates	s of Status		
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## COVER LETTER \*

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TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: SQTY GEORGIAG INC  DOCUMENT NUMBER: P24000040919
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Gary Grondand Name of Contact Person
Firm/ Company
19624 TESUTO Way
Erters, FL 33967 City/ State and Zip Code
City/ State and Zip Code
Dmail address to be used for future annual report populication)
For further information concerning this matter, please call:
Gary Giordan at (118) 354-6359  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:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment to Articles of Incorporation

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Gary Giordano Inc	
	filed with the Florida Dept. of State)
<u> </u>	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Gary Giordano P. A.	The new
name must be disting hishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered." "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp"
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)	2024 JUI
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	<b>(9</b>
Name of New Registered Agent	
(Florida stree	Laddwees
	rada (53)
New Registered Office Address: (1	ityr (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar wi	th and accept the obligations of the position.
Signature of New Reg	istered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). 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	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				-
_ Remove				

(Attach	<mark>ending or adding ad</mark> Y <i>additional sheets, ij</i>	l <u>ditional Arti</u> f necessary).	(Be specific)	<u>(s) here</u> ;		
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lf an a	amendment provide	s for an exch	ange, reclassificat	ion, or cancel.	ation of issued share:	s.
provi	isions for implemen	ting the ame	ndment if not con	tained in the a	mendment itself:	_
( į	if not applicable, ind	ucate (N/A)				
		<u> </u>				
						-

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	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file da	(e)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirement artment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopaction was not required.	ted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes cast for the a icient for approval.	mendment(s)
	oved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amendm	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	<del></del>	
	(voting group)	
selected	712 petty, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or I fiduciary by that fiduciary)	
-	(Typed or printed name of person signing)	
-	Presider	