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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : 120180000011 Phone : (844)386-0178

Fax Number : (214)317-4754

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September 27, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GOBBELL HAYS PARTNERS, INC. 217 FIFTH AVE. NORTH NASHVILLE, TN 37219

SUBJECT: GOBBELL HAYS PARTNERS, INC.

REF: P33173

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Agnes Lunt FAX Aud. #: H21000353411 Regulatory Specialist III Letter Number: 121A00023281 To: 18506176380 From: 12147128131 Date: 10/01/21 Time: 5:42 AM Page: 03/06

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APPLICATION BY FOREIG	PROFIT COR N PROFIT CORPORAT HORIZATION TO TRAN	 PORATION ION TO FILE AMENDMENT TO SACT BUSINESS IN FLORIDA	) APPLICATIO	on For	,
Aut		. 607.1504, F.S.)	Ä	SEC SEC	) )
		TION I COMPLETED)	A A V	SECRETARY	· 17
	P331	173	ָרָ הַ		. [
_	(Document number of	corporation (if known)	<del>لد</del> -	S A	
GOBBELL HAYS PARTNERS, INC.			OR!	STAT	
2. TENNESSEE		the records of the Department of Sta 3. 03/12/1991	itc)	<del> </del>	
(Incorporated under	laws of)	(Date authorized to do	business in Flori	da)	
(4-7) 4. If the amendment changes the name of the	COMPLETE ONLY TH	TION II TE APPLICABLE CHANGES) The change effected under the laws of	its invisdiction a	ſ	
incorporation? 6/1/2021			its jurisoretion o	1	
GHP, Inc.					
(If new name is unavailable in Florida, e. 6. If the amendment changes the period		•	ting business in	Florida)	
	(New d	duration)			
7. If the amendment changes the juriso	diction of incorporation, ind	licate new jurisdiction.			
	(New jur	risdiction)	<del></del>		
8. If amending the registered agent and/ new registered agent and/or the new r	or registered office addrese egistered office address:	ss in Florida, enter the name of the	<u>:</u>		
Name of New Registered Agent			<u>_</u>		
-	(Florida stree	et address)	<del></del> -		
New Registered Office Address.		Florida			
New Registered Office Address.	(City)	, - //////	(Zip Code)	_	
New Registered Agent's Signature, if I hereby accept the appointment as regis	changing Registered Ager stered agent. I am familiar	nt: with and accept the obligations of t	he position.		
Signature of New Reg.	istered Agent, if changing	<del></del>			

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			Add	
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			Remove	
Attached is a certific of the application to under the laws of wh	cate or document of similar import, evidence the Department of State, by the Secretary of S nich it is incorporated.	ing the amendment, authentic State or other official having c	cated not more than 90 days is ustody of corporate records in	orior to delivery the jurisdiction
	1mno	WY-		
- Dominique A		sident or other officer - if in pointed fiduciary, by that fid		FALL
Dominique A	d or printed name of person signing)	Preside	ent c of person signing)	AH
		G FEE \$35.00	··· [	SECHETARY OF STATE

(((H21000353411 3)))



## Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

LEGALINC CORPORATE SERVICES INC STE 250 10601 CLARENCE DR FRISCO, TX 375033

September 20, 2021

Control # 90810

Effective Date: 0

06/01/2021

Receipt #:

Filing Fee: \$0.00

#### CERTIFICATE OF NAME CHANGE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that Articles of Amendment of GOBBELL HAYS PARTNERS, INC. were filed in this office on the effective date noted above, changing the name to GHP, INC..

Tre Hargett Secretary of State

Processed By: Tiffany Washington

(((H21000353411 3)))



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

# RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I. the undersigned Dominique Arrieta		, do hereby certi			
(Name)		.,	- J		
that this Resolution of the Board of Directors of GHP, Ir	nc	_			
(Name of Corporation					
		_			
a corporation duly organized and existing under the laws of	FININESSE	<u> </u>			
	(State or Country	<i>(</i> )			
was adopted on 9/22/2021	<u> </u>	adopting the alt	ernate	2	
name of GHP1.com, Inc.		į	SECF	2021 OCT -	
(Alternate Name) NOTE: Must c	ontain a corporate suffi	x) = =	<u> </u>	9	
for use in Florida as its real name is unavailable in Florida.		ָר. ני	ETARY OF	-	
Date: 9/22/2021		rcorio	FSTATE	AM 9: 39	0
1man-	President	Φ,	•	T)	
Signature of Chairman, Vice Chairman of the Board, a director or any officer	Title of p	erson signing			

#### FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

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