## PG/600084212 Requestor's Name

Requestor's Name 2120 Killarmey Way Post Office Box 12458

Address

Tallahassee, FL 32317

904/222-4000

City/State/Zip

Phone #

Attn: Lori

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1	Bulfcrest 1	notel, Inc	<del></del>
2.	(Corporation Name)	(Document #)	Marie 1
3.	(Corporation Name)	(Document #)	(高元)
<u></u>	(Corporation Name)	(Document #)	
4	(Corporation Name)	(Document #)	5
Walk in	Pick up time	Call when Cartified	i Copy
Mail ou	t Will wait	Photocopy Certifica	ate of Status

NEW FILINGS		
黄	Profit	
7	NonProfit	
	Limited Liability	
	Domestication	
	Other	

	AMENDMENTS
X	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

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OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/
Foreign
Limited Partnership
Reinstatement
Trademark
Other

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OIVISION OF CORPORATIONS

TALLAMASSEE FLORIDAS

Examiner's Initials

ADR

## ARTICLES OF AMENDMENT TO THE ARTICLES OF INCORPORATION OF **GULFCREST MOTEL, INC.**

OO THE PARTY OF TH Pursuant to the provisions of Section 607.187 of the Florida Statutes, the under

1. The present name of the Corporation is Gulfcrest Motel, Inc.

corporation adopts the following Articles of Amendment to its Articles of Incorporation:

The material appearing as Article I is hereby deleted and the following substituted 2. therefor:

## "ARTICLE I

The name of this Corporation shall be Dalton, Inc."

- 3. The Articles of Incorporation shall remain otherwise unaffected by such amendment.
- 4. The above Articles of Amendment were approved at meetings of the Shareholders and Directors of the Corporation on January 19, 2000.

GULFCREST MOTEL, INC.

ROBERT H. DALTON

As Its President

Attest:

By: Tudrey C. Dalton

As Its Secretary

## STATE OF FLORIDA COUNTY OF LEON

I HEREBY CERTIFY that on this the 19th day of January, 2000, before me, an officer duly authorized to take acknowledgments in the State and County above, personally appeared Robert H. Dalton, President of Gulfcrest Motel, Inc., who produced a Florida Driver's License as identification and whom is known to me to be the person described in and who executed the foregoing and he acknowledged before me that he executed the same for the purposes therein stated.

WITNESS my hand and official seal on the 19th day of January, 2000.

Printed Name:

My commission expires: COMMISSION # CC531654 EXPIRES JUNE 15, 2009 DED THESE TROY FAIN INSURANCE, INC.

F:\LORI\DALTON\ROBERT\CORP\AMEND.NAM