

P97000035349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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10/20/10--01011--006 \*\*35.00

*Amend*

10 NOV 17 PM 3:19  
CLERK OF STATE  
TREASURY DEPT

Roberts NOV 17 2010



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 21, 2010

EDWARD W. SOULSBY, ESQ  
KENNETH B. WHEELER, LL.M TAX, P.A.  
1155 LOUISIANA AVENUE, STE 100  
WINTER PARK, FL 32789

OCT 25 2010

SUBJECT: GAMAR LABORATORIES, INC  
Ref. Number: P97000035349

We have received your document for GAMAR LABORATORIES, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 610A00024984

RECEIVED  
10 NOV 17 AM 8:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** GAMAR LABORATORIES, INC.

**DOCUMENT NUMBER:** P97000035349

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

Please return all correspondence concerning this matter to the following:

Edward W. Soulsby, Esq.

Name of Contact Person

Kenneth B. Wheeler, LL.M. Tax, P.A.

Firm/ Company

1155 Louisiana Avenue, Suite 100

Address

Winter Park, FL 32789

City/ State and Zip Code

esoulsby@wealthcare.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Edward W. Soulsby, Esq.

Name of Contact Person

at ( 407 )

645-1779  
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 &  
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 Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

KENNETH B. WHEELER, LL.M. TAX, P.A.

ATTORNEYS AND COUNSELORS AT LAW

1155 LOUISIANA AVENUE, SUITE 100

WINTER PARK, FLORIDA 32789

KENNETH B. WHEELER, J.D./LL.M. TAX

EMAIL: [kwheeler@wealthcare.com](mailto:kwheeler@wealthcare.com)

EDWARD W. SOULSBY, J.D.

EMAIL: [esoulsby@wealthcare.com](mailto:esoulsby@wealthcare.com)

PRACTICE LIMITED TO

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TAX LITIGATION

PHONE: (407) 645-1779

FAX: (407) 740-5691

INTERNET: [www.wealthcare.com](http://www.wealthcare.com)

November 15, 2010

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

**RE: Gamar Laboratories, Inc - Articles of Amendment**

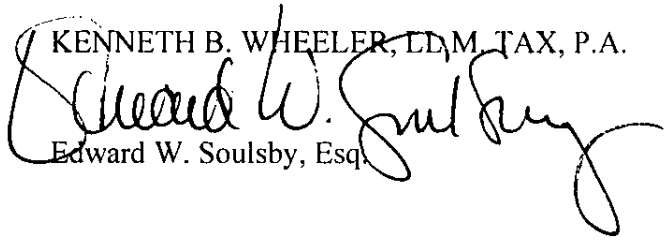
Dear Sir or Madam:

Pursuant to your letter dated October 21, 2010, enclosed herewith are the original signed Articles of Amendment to the Articles of Organization for Gamar Laboratories, Inc for filing.

If you have any questions regarding this matter, please do not hesitate to contact this office.

Sincerely,

KENNETH B. WHEELER, LL.M. TAX, P.A.

  
Edward W. Soulsby, Esq.

EWS/pmw

enclosures

cc: Mr. Davian S. Santana

Articles of Amendment  
to  
Articles of Incorporation  
of

GAMAR LABORATORIES, INC

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

P97000035349

(Document Number of Corporation (if known))

FILED  
10 NOV 17 PM 3:20  
TREASURY OF STATE  
HALL OF RECORDS  
TALLAHASSEE, FLORIDA

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:

*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)

4290 S. Hwy 27, Suite 201

Clermont, FL 34711

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:

Kenneth B. Wheeler, LL.M. Tax, P.A.

1155 Louisiana Avenue, Suite 100

New Registered Office Address:

(Florida street address)

Winter Park

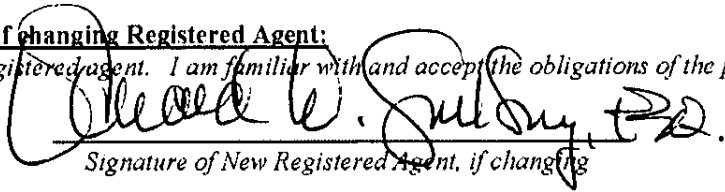
(City)

Florida 32789

(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

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>D</u>	<u>Gabriel Pulido</u>	<u>4116 Medina Way</u> <u>Sebring, FL 33872</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>ST</u>	<u>Mrs. Yolando P. Pulido</u>	<u>4116 Medina Way</u> <u>Sebring, FL 33872</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>D,P</u>	<u>Davian S. Santana</u>	<u>4290 S. Hwy. 27, Suite 201</u> <u>Clermont, FL 34711</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

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**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)*

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The date of each amendment(s) adoption: 10-12-10

(date of adoption is required)

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

☒ 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)

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

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated October 12, 2010

**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)

Davian S. Santana

(Typed or printed name of person signing)

Director

(Title of person signing)