Paga 39003

(R	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates o	of Status		
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2018 DEC -3 PM 4:42 SAGREFART OF STATE

C. GOLDEN DEC - 3 2018

COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: Guild Hall Artists, Inc DOCUMENT NUMBER: P98000689662					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following: TVIII Name of Contact Person					
1221 Petronia St					
Key West H 33040 City/ State and Zip Code Ann ron KW & bell south. net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call: Aun Twvine at 305, 2943625					
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) (Additional Copy is enclosed)					
Mailing Address Street Address					

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2018

ANN IRVINE 614 DUVAL STREET KEY WEST, FL 33040

SUBJECT: GUILD HALL ARTISTS, INC.

Ref. Number: P98000089662

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

You failed to make the correction(s) requested in our previous letter.

- √ The current name of the entity is as referenced above. Please correct your document accordingly.
- You can check only one (1) box regarding the type of action; also please make all corrections for your officers/directors on page 2 and remove the information from page 4.
- √ Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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

you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory: Specialist II

Letter Number: 418A00023322



October 25, 2018

ANN IRVINE 614 DUVAL STREET KEY WEST, FL 33040

SUBJECT: GUILD HALL ARTISTS, INC.

Ref. Number: P98000089662

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

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please list the title(s) of each officer in your document.

Please list the street address of each officer/director.

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) 245-6050.

Letter Number: 818A00021969

Claretha Golden Regulatory Specialist II

> NOV -7 AM 9: RETAIN ON SEC.

> > www.sunbiz.org

Articles of Amendment

to

FILED

Articles of Incorporation

2018 DEC -3 PM 4: 42 (Name of Corporation as currently filed with the Florida Dept. of State) 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: 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: New Registered Agent's Signature, if changing Registered Agent: \overline{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)

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	<u>V</u> <u>Mike Jones</u>
<u>X</u> Add	SV Sally Smith
Type of Action (Check One)	<u>Title Name</u> <u>Address</u>
1) A Change	TO SUSAN White 685 E. Longlaket Bloomfield Hills, MI
Add	Bloomfield Hills, MI
Remov	
2) Change	TO SUSAN STURTEVANT 685E, Longlake BloomfieldHills, M
Remov	1020U
∭3) <u>#</u> Change Add	SD SUSAN WHITE LOBS E. Longhake Rd Bloom field Holls, M
Remov	48304
4) Change	50 Susan Sturtevant 685 E. Longlake Re
Add Remov	Bloomfield Hills, N
Kemor	
5) Change	
Add	
Remov	
6) Change	
Add	
Remov	

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
•	

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# 10 H 10 H	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
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· · · · · · · · · · · · · · · · · · ·	
	-

•	11.1.18	
The date of each amendment(s) adoption:	10.1.10	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	11 . 1 . 1 . 1 .	
(n)	o more than 90 days after amendment	file date)
Note: If the date inserted in this block does not n document's effective date on the Department of Stat		quirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)	
The amendment(s) was/were adopted by the shar by the shareholders was/were sufficient for appropriate the shareholders was/were sufficient for approximately the shareholders was/were sufficient for approximately the shareholders was/were adopted by the shareholders was/were sufficient for approximately the shareholders was/were sufficient for approximately the shareholders was/were adopted by the shareholders was/were sufficient for approximately the shareholders was a sufficient for approximately the shareholders was a sufficient for a suffic		or the amendment(s)
☐ The amendment(s) was/were approved by the sha must be separately provided for each voting gro		
"The number of votes cast for the amendme	ent(s) was/were sufficient for approva	I
by(voting		
(voting	group)	
☐ The amendment(s) was/were adopted by the boar action was not required.	d of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were adopted by the incoaction was not required.	rporators without shareholder action a	and shareholder
Dated	3	
Signature Am	Drvine, P.	7 U.S
	t or other officer - if directors or offic	
selected, by an incorpor appointed fiduciary by	rator – if in the hands of a receiver, tru	istee, or other court
••	•	
Ann	Trvine ped or printed name of person signing)	
(Typ	ed or printed name of person signing)	
Pres	ident	
	(Title of person signing)	