## M 83184

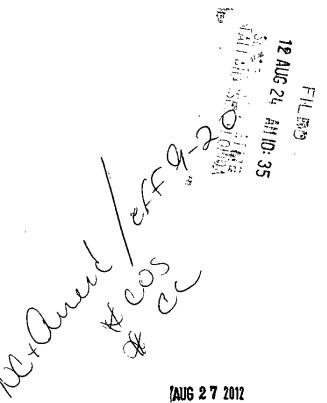
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## **COVER LETTER**

Division of Corporations					
NAME OF CORPORATION: Gold Royalty Corporation					
MQQ1QA					
DOCUMENT NUMBER: M83184					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Frances McCrimmon	_				
Name of Contact Person	-				
Gold Royalty Corporation	_				
Firm/ Company					
10107 Cleghorn Dr.	_				
Address					
Wesley Chapel, Florida 33576					
City/ State and Zip Code					
jobozz@yahoo.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
•					
Thomas Mccrimmon at (813 ) 713-1776	·r				
Thomas Mccrimmon at (813) 713-1776  Name of Contact Person Area Code & Daytime Telephone Number	<u>.r</u>				
Thomas Mccrimmon at (813 ) 713-1776	·r				
Thomas Mccrimmon at (813) 713-1776  Name of Contact Person Area Code & Daytime Telephone Number	·r				
Thomas Mccrimmon  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:  \$\Begin{array}{cccccccccccccccccccccccccccccccccccc	<u> </u>				
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Tallahassee, FL 32301

050/20

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as c	urrently filed with the Flo	rida Dept, of State)		
<b>Gold Royalty Corporation</b>	on <b>#</b> ∖83184			
(Document)	Number of Corporation (if k	nown)	· · · · · · · · · · · · · · · · · · ·	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this Fl	orida Profit Corporation	adopts the following an	nendment(s) t
A. If amending name, enter the new nam	ne of the corporation:			
Reuben Cannon Enterta	ainment, Inc.		··· Th	e new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or "Co	". A professional corpo	porated" or the abbre	viation
D. Enter many multiplicated office address if	annikashlar	N/A		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				~ ~ ~
		<del> </del>		11上四8
			77	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST Of		N/A	Sail Sail	10: 35
D. If amending the registered agent and/ new registered agent and/or the new		s in Florida, enter the na	ame of the	
•	N/A			
Name of New Registered Agent			_	
_	/FL 11 4			
,	(Florida stree <b>V/A</b>	aaaress)		
New Registered Office Address:	(City)	, Florid	a(Zip Code)	
	(City)		(Zip Code)	
New Registered Agent's Signature, if chall hereby accept the appointment as register		th and accept the obligation	ons of the position.	
Sign	nature of New Registered Ag	ent, 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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	P/CE	0	Reuben Cannon	1401 Peachtree Street
X Add				Suite 500
Remove				Atlanta, GA 30309
2) Change		<del></del>		
Add				
Remove				
3) Change		<del></del>		
Add				
Remove				
4) Change	<del></del>	_		
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5) Change				
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6) Change				
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Remove				

	(Be specific)
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If an amount moved as for an arab	
If an amendment provides for an exclusions for implementing the ame	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) a	Adeption: August 20, 2012
Effective date if annlicable:	eptember 20, 2012
metave date <u>it appressore</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated8	-20-12
Signature	rances Mc Crimmon
	director, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)
	Frances McCrimmon
	(Typed or printed name of person signing)
	Director
	(Title of person signing)