

Amol

SEP 11 2013

R. WHITE

(Re	equestor's Name)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: GIORLY AS	SSETS AND VA	LUE CORP	
	BER: 205868077			
	of Amendment and fee are su	bmitted for filing.	·	
Please return all corre	spondence concerning this ma	tter to the following:		
	GISELLE MARIA	CHAVEZ		
	GISELLE IVIANIA			
	OLOBLY AGOST	Name of Contact Person		
	GIORLY ASSETS	S AND VALUE (	CORP	
		Firm/ Company		
	572 EAST 4 AVE	•		
	Address			
	HIALEAH FL 330	10	_	
		City/ State and Zip Cod	e	
ais	ellemchavez@yał	noo com		
910	E-mail address: (to be us	sed for future annual report	notification)	
	on concerning this matter, pleas	se call: at ( <b>786</b>	, 426-3341	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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		Ameno	Address Iment Section on of Corporations	
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		

FILED

Articles of Amendment to Articles of Incorporation of SECRETARY OF STATE TALLAHASSEE, FLORIDA

## GIORLY ASSETS AND VALUE CORP

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

205868077		-
(Document Numb	per of Corporation (if known)	
arsuant to the provisions of section 607,1006, Fl Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following	g amendmen
. If amending name, enter the new name of the	he corporation:	
		_The new
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "Coord "chartered," "professional association," of	word "corporation," "company," or "incorporated" or the at Corp," "Inc," or "Co". A professional corporation name must or the abbreviation "P.A."	bbreviation contain the
Enter new principal office address, if application of the principal office address <u>MUST BE A STREET</u>		-
		-
		-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E DOV	
(Maning address MAT BE A POST OFFICE	E BOA)	_
	<del></del>	-
		_
	gistered office address in Florida, enter the name of the	
new registered agent and/or the new register		
Name of New Registered Agent		
	(Florida street address)	
<del></del>	·	
New Registered Office Address:	. Florida (Zip Code)	_

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V		ORLANDO CHAVEZ	572 EAST 4 AVE
Add				
X Remove				
2) Change				
Add				
Remove				
3) Change		<u>—</u>		
Add				
Remove				
4) Change				
Add		<del></del>		
Remove				
5) Change				
Add				
Remove				
(1) (1)				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
- 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
	( <del></del>	
	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
ANCELLATION OF ISS	SUED SHARES	
·		

The date of each amendment(s) adoption: 08/27/2013	, if other than the
date this document was signed.  Effective date if applicable:  08/27/2013	
(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 east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(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 08/27/2013	
Dated O T T T T T T T T T T T T T T T T T T	
Signature	
(By a prector, 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)	_
Giselle M Chausz Presider (Typed or printed name of person signing)	nT
PrisidenT (Title of person signing)	<del></del>