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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: GEN PORT SERV	ICES CORP			
	UMBER: P22000011455				
	cles of Amendment and fee are su	bmitted for tiling.			
Please return all c	orrespondence concerning this ma	tter to the following:			
	Enrique Story				
		Name of Contact Person	1		
	Future Trust Corp				
		Firm/ Company			
	2700 Glades Circle, Suite 139)			
	Address				
	Weston, FL, 33327				
		City/ State and Zip Code	2		
	mikel@enriquestoryllc.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further inform	ation concerning this matter, pleas	se call:			
Enrique Story		at (de & Daytime Telephone Number		
Na	me of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fe	e □\$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	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations entre of Tallahassee N. Monroe Street, Suite 810 Issee, FL 32303		

Articles of Amendment to Articles of Incorporation

Gen Port Services Corp

(Same	- f C	Lad wide ab - Disside Desay of Casas	
	or Corporation as currently in	led with the Florida Dept. of State)	
P22000011455			
	(Document Number of Co	orporation (if known)	:
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this <i>Flor</i>	rida Profit Corporation adopts the fo	llowing amen
A. If amending name, enter the new n	ame of the corporation:		
			The
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A pr		
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>			
Enter new mailing address, if appl (Mailing address MAY BE A POST			
(Muning uturess SIAT BL A FOST			
	-		
). If amending the registered agent ar	nd/or registered office address	in Florida, enter the name of the	
new registered agent and/or the new	w registered office address:		
Name of New Registered Agent	FUTURE TRUST CORP		
	2700 GLADES CIRCLE SUIT	 TE 139	
	(Florida street a		
N 0 1 100 44	WESTON		3327
New Registered Office Address:	(City	, Florida,	(Zip Code)
	,	•	,
New Registered Agent's Signature, if c	hanging Registered Agent:		
hereby accept the appointment as regist	ered agent. I am familiar with	and accept the obligations of the pos	ition.
	7.11	7/>	
	gantintente		
	Signature of Marco Davids	town town if the control	
	Signature of New Regist	кегеа мусти, у спапуту	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, r 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; CEs Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 6 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 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change PT John Doe X Remove \underline{V} Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> <u>Addres</u>s (Check One) Р JOHNY GUANIPA COLMENARES 1737 ASPEN LN, WESTON, FL, . 1) ____ Change __ Add Remove ADRIANA GRATEROL LINARES 1132 SE 7TH CT APT 304 2) ____ Change DANIA BEACH, FL 33004 Add Remove SEC LUIS PARILLI 1737 ASPEN LN. WESTON FL 31 _ Change Add Remove SEC JOSE VILLEGAS CERVINO 1750 NW 107 AVE UNIT L215, N 4) ____ Change Add Remove 5) ____ Change ___ Add ___ Remove 6) ____ Change ___ Add __ Remove

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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(if not applicable, indicate N/A)	
	
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November 02, 2022	
The date of each amendment(s) adoption:	, if othe
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this educument's effective date on the Department of State's records.	late will not be lis
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☑ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	tion and sharehold
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendmen by the shareholders was/were sufficient for approval.	1(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
•••	
by	
(voing group)	2
	• ;
Dated	
	•
Signature Advision	, · ·
(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 cou	
appointed fiduciary by that fiduciary)	- <u>-</u> ,
	÷. ;
(Typed or printed name of person signing)	VARES
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	
(Title of person signing)	