795000096012

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1
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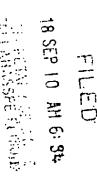




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COVER LETTER

10: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLOBAL POLE	TRUSION GROUP COR	P
DOCUMENT NUM	BER: P95000096012		
The enclosed Articles	of Amendment and fee are so	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	MOHAMED AKROUF		
		Name of Contact Perso	u
	GLOBAL POLE TRUSION	GROUP CORP	
		Firm/ Company	
	111 NE 1st Street 8th Flo	or	
		Address	
	Miami, FL, 33132		
		City/ State and Zip Cod	c
MO.	AKROUF@POLETRUSION	I.COM	. /
-	E-mail address: (to be u	sed for future annual report	notification)
	on concerning this matter, plea		914.7047
MOHAMED AKROUF		at (914-7047
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Dep	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			Address
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	
			assee, FL 32301

Articles of Amendment to Articles of Incorporation of

GLOBAL POLE TRUSION GROUP CORP				
(Name of Corporation as current)	v filed with the Florida Dept. of State)			-
P95000096012				
(Document Number o	f Corporation (if known)			-
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation,	Florida Profit Corporation adopts the follow	ving amendm	ieni(s) i	o
A. If amending name, enter the new name of the corporation:				
		The no	11.	
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or " word "chartered," "professional association," or the abbreviation"	Co". A professional corporation name mu			
B. Enter new principal office address, if applicable:	20801 MILES RD.			
(Principal office address MUST BE A STREET ADDRESS)	NORTH RANDALL, OH			
	44128	!!; .	<u>-</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	111 NE 1st Street 8th Floor	5-73 22-13 23-13	SEP	
	Miami, FL	いだ。	<u></u>	Ę
	33132	.31.	<u> </u>	
D. If amending the registered agent and/or registered office adding registered agent and/or the new registered office address	ress in Florida, enter the name of the		6: 31	•
Name of New Registered Agent				
(Florida str	eet address)	_		
New Registered Office Address:	, Florida			
		ip Code)		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	<u>:</u> with and accept the obligations of the positio	H),		

Signature of New Registered Agent, it 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; $TR \leftarrow Trustee$; $C \leftarrow Chairmon or Clerk$; 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, Freasurer, 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 Remaye, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doc	
N Remove	Y	Mike Jones	
_N Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u> l'itle</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

atach addition	d sheets, if necessary) (Be specific)		
			
<u>.</u> <u>-</u>		 	
			
f an amendme	nt provides for an exchange, reclassific	ation or cancellation of is:	med shares.
provisiony for	implementing the amendment if not co	ntained in the amendment	itself:
(if not app	licable, indicate N/A)		
			
 -			

The date of each amendment	(s) adoption: if other than the
date this document was signed	
	August 8th, 2018
Effective date <u>if applicable</u> :	tno more than 90 days after amendment file date:
	(no more than 90 days after amenament fue aute)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/wei by the shareholders was/wa	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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)
action was not required. The amendment(s) was/well	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required,	
	st 8th, 2018
Dated Signature	
(F	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	MOHAMED AKROUF
	(Typed or printed name of person signing)
	SECRETARY
	(Title of person signing)