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## **COVER LETTER**

TO: Amendment Sect Division of Corp			
NAME OF CORPOR	RATION: Golden Pr	n è lèneellaise I	nc
DOCUMENT NUMB	BER: <u>304947</u>		·
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	PHUIA	Name of Contact Person  Gin WAREA  Firm Company	ALC
	(Spenen	Gin & WAREA	YOUSE INC.
		Firm Company	100000
		Firm Company  Address	
	T.	Address 2.2	M. C
	JA9	FL 32. City/ State and Zip Code	
			gmail, com
For further informatio	n concerning this matter, pleas	se call:	
LISA C	LAMBERT	ar 650	le & Daytime Telephone Number
Name	of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	ortment of State.
S35 Filing Fee	☐IS43 75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
	endment Section		ment Section
	ision of Corporations . Box 6327		n of Corporations entre of Tallahassee
	ahassee, FL 32314		S. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)
(Document Number of Corporation (if known)
insuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) Articles of Incorporation:
If amending name, enter the new name of the corporation:
The new memors be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," nc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word hartered," "professional association," or the abbreviation "P A"
Enter new principal office address, if applicable:  rincipal office address MUST BE A STREET ADDRESS )
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Enter new mailing address MAY BE A POST OFFICE BOX)
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 PHILLS G. MANSHALL  5206 PITNIC Rd  (Florida street address)
New Registered Office Address:    See Registered Office Address   Say   Florida   Say   (City)   (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:  nevely accept the appointment as registered agent. I am familiar with and accept the obligations of the position.  Signature of New Registered Agent, it changing

Check it applicable

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

## FILED

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: <u>X</u> Change	<u> 6.1.</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	2022 SALI TALL
X Add	<u>SV</u>	Sally Smith	JUN CALLI LAHV
Type of Action (Check One)	Title	Name	Address SSE
1) Change	P	Philip Marshall	PO Box 803 ===================================
_X_ Add		•	DAN PL 32565 23
Remove 2) Change Add		Stephen Wolfe	5101 Huy 4 East SAN FL 3395
Remove Change		Concettia NAI	70 500 1438 Atmore AL 36504
Remove 4) Change Add	<u>S</u>	Pam Stangelmid	5833 Hermityge Circle Milton, FL 30570
Remove 5) Change Add	1	Lisa Lambert	7700 FLASICE LANE
Remove 6) Change Add Remove	7	DM. Frolden	5414 N. Commerce St Say FL 32565

(Attach additional sheets, if necessary). (Be specific)			
	TALLAMASSEE FL	2022 JUN -3 PM 4: 23	FILED
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)	FLERIGA	<sub>4</sub> : 23	

The date of each amendment(s) addate this document was signed.	doption: S/St/ZiXX	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	,	
document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will partment of State's records	If not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	opted by the incorporators, or board of directors without shareholder action and	d shareholder
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) officient for approval.	2022 J SECTALL
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	JUN-3
"The number of votes cast	for the amendment(s) was/were sufficient for approval	PA PA
by	(voting group)	PM 4: 23 OF STATE E. FLERIEA
Dated <u>\$</u> /•2	1/2022 1-his Manhall	
	rector, president or other officer - if directors or officers have not been d. by an incorporator - if in the hands of a receiver, trustee, or other court	
selected	led fiduciary by that fiduciary)	
selected	(Typed or printed name of person signing)	