## N17000 009 121

(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ac	ddress)	
(Ád	ddress)	
(Ci	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	<del></del>
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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## COVER LETTER

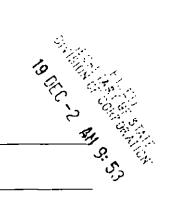
TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: Guyana Assticoation of Jocksonville DOCUMENT NUMBER: <u>N17000009121</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Justin Wright
(Name of Contact Person) Guyana Asst Of Jacksonville (Firm/ Company) 3008 N.W. 4814 ST (Address) Fort lauderdale F1 33309 (City/ State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sustin Wright at 305 992.0272
(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: □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as current	ly filed with the Florida D	dept. of State)
	9121	
(Document Number	r of Corporation (if known)	)
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Pro</i>	fit Corporation adopts the following
A. If amending name, enter the new name of the corporation	on:	
ivan zunc.	L Gate Inc	The new
name must be distinguishable and contain the word "corporati" (Company" or "Co," may not be used in the name.	on" or "incorporated" or	the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
		<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ag		the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida s	street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A large land land land land land land land land		bligations of the position.
	mature of New Revistered	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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doc Mike Jones Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
1) Change			· · · · · · · · · · · · · · · · · · ·		
Add					<u>-</u>
2) Change					<u>.</u> .
Add Remove					
3) Change					
Add					
4) Change					
Add Remove					
5) Change					
Add Remove					
6) Change					
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here:		
(attach additional sheets, if necessary). (Be specific)		
	···	
	·	
·		
<del>1</del>		
,		

	date of each amendment(s) adoption:, if other than to
1216	this document was signed.
Effe	ctive date if applicable:
	(no more than 90 days after amendment file date)
	E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ament's effective date on the Department of State's records.
Ado	ption of Amendment(s) (CHECK ONE)
Ø	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated <u>09/66/19</u>
	Signature from which
	(By the chairman of vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)
	(Title of person signing)