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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	INTERNATIONAL INC
DOCUMENT NUMBER: N17000011214	
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matte	τ to the following:
FERNANDA SILVA	
	(Name of Contact Person)
A&F FINANCIAL LLC	
	(Firm/ Company)
4851 W HILLSBORO BLVD, STE# A2	
	(Address)
COCONUT CREEK, FL 33073	
	(City/ State and Zip Code)
AF-FINANCIAL@AF-FINANCIAL.COM	·
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
FERNANDA SILVA	(754) 205-9371
(Name of Contact Person	
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailino Address	Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GI	ORAL	PASSION	INTERNATIONAL	LINC

(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
N17000011214		
(Document Num	iber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation add	opts the following
A. If amending name, enter the new name of the corpora	ation:	
GLOBAL PASSION 21 INC		- The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable:	ation" or "incorporated" or the abbreviation "C	Corp." or "Inc."
(Principal office address MUST BE A STREET ADDRESS	<u>S</u>)	
		
		<u> </u>
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
		19 PH I2:
		<u></u>
D. If any discrete and again and/an assistant of	Encodduses in Florida ander the name of the	10 P
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		
Name of New Registered Agent:		
<u>,</u>		
	(Florida street address)	
New Registered Office Address:		
	, Florida	
	(City) (Zip Co	ode)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am j	ed Agent: familiar with and accept the obligations of the po	osition.
	Signature of New Registered Agent, if changing	
	Signature of their negistered rigetti, 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>V</u> <u>Mi</u>	<u>nn Đoc</u> ke Jones lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove			
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Ai (attach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amend was/were sufficient for approval.	lment(s)
☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was adopted by the board of directors.	/were
Dated 03/12/18	
Signature Willed	
(By the chairman or vive chairman of the board, president or other officer-if di have not been selected by an incorporator – if in the hands of a receiver, trust other court appointed fiduciary by that fiduciary)	
MARCELO O ALMEIDA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	