N 2000000203

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of S	Status
Special Instructions to Filing Officer:	

Office Use Only



600359844206

02/22/21--01043--004 **35.00

6.51 S. 1. 1.52

AR 2111

COVER LETTER

TO: Amendment Section

Division of Corporations Global Eco Army Inc NAME OF CORPORATION: __ L20000150877 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Alicia Valdes (Name of Contact Person) Global Eco Army Inc
(Firm/Company) 100 S Ashley DR Suite 600
(Address) TAMPA FL 33602
(City/ State and Zip Code) Alicia. Ve globale coarmy. com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Alicia Valdes at 813-528-6490 (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 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

10

Articles of Incorporation

Global Eco	Army	Inc.	•	C/ F! I. C
Name of Corporation as currently filed with the Floris	da Dept. of St	ate)		
(Document Nu	umber of Corp	oration (if knov	wn)	
Pursuant to the provisions of section 617.1006, Florida Stamendment(s) to its Articles of Incorporation:	atutes, this Flo	erida Not For I	Profit Corporation ad	opts the following
A. If amending name, enter the new name of the corpo	oration:			
				The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "i	ncorporated"	or the abbreviation "(Corp." or "Inc."
B. Enter new principal office address, if applicable:			· -	
Principal office address <u>MUST BE A STREET ADDRE</u>	<u>:SS</u>)			
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
N. If any adding the profession of any adding the second	a CC as a did asset	in Florida o		
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 		s in Fioriua, ei	her the name of the	
Name of New Registered Agent:				
name of the registered riges.				
		(Flori	da street address)	
New Registered Office Address:				
			, Florida	
	(City)		(Zip C	ode)
New Registered Agent's Signature, if changing Registe	ered Agent:			
I hereby accept the appointment as registered agent. I ar	n familiar with	and accept the	e obligations of the pe	osition.

Signature of New Registered Agent, if changing

If amending the Officer and address of each Off (Attach additional sheets, Please note the officer/dii P - President; V= Vice F Executive Officer; CFO = held, President, Treasure	icer and/ if necess rector titl President; = Chief F	for Director be sary) le by the first le : T= Treasurer linancial Office	eing added: etter of the office title: er, S= Secretary; D= Di er, If an officer/directo	rector: TR= Tru	stee: C = Chairman o	or Clerk: CEO = C	Thief
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ves the co	orporation, Sal	lly Smith is named the				
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith					
Type of Action (Check One)	Title	Nan	<u>ne</u>		<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)ChangeAdd	 ,						
Remove E. If amending or addin (attach additional shee							
ARTICLE.							
SAID educational the elimin	Orgo	anizatio	on is organ	uzed ex	clusively.	for chari	table,
educational	έ (<u>Scientif</u>	ric Purpos	es, inclu	iding for	Such pur	Poses,
the elimin	nation	and	reduction	of Polly	ution in t	the land,	air,

and water.

Upon the dissolution of the organization, assets
Shall be distributed to one of more nanprofit
Upon the dissolution of the organization, assets Shall be distributed to one or more nonprofit organizations with Similiar purposes and goals, or Shall be distributed to the federal government, or to a State or local government, for a public
Shall be distributed to the federal agreenment.
of to a State or local government for a public
purpose.
- Proposition -
The date of each amendment(s) adoption: February 14, 2021, if other than the 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 date will not be fisted as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
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 2/14/2021
Signature Abad Valdes
(By the chairman or 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)
Alicia Valdes
(Typed or printed name of person signing)
CEO

(Title of person signing)