N2400001078

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FILED 2024 DEC -L PM 12: 53 SECRETARY OF STATE TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 14, 2024

VICTOR PAGAN 7550 FUTURES DRIVE SUITE 206 ORLANDO, FL 32819

SUBJECT: G-BISE CORP Ref. Number: N24000011078

We have received your document for G-BISE CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

	2024 (
Please return your document, along with a copy of this letter, within 60 days or A your filing will be considered abandoned.)EC -4	1
If you have any questions concerning the filing of your document, please cal $\frac{1}{10} \frac{1}{10}$ (850) 245-6050.	21 H.J	

Morgan E Lovett Regulatory Specialist II

Letter Number: 024A00024927

12: 53

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www.sunbiz.org

COVER LETTER

TO: Amendment Section

Division of Corporations						
G-BISE CORP						
N24000011078 DOCUMENT NUMBER:						
The enclosed Articles of Amendment and fee are sub-	nitted for filing					
Please return all correspondence concerning this matte	r to the following					
VICTOR PAGAN						
	(Name of Contact Perso	[1.]	· ·			
QUALITY FINANCIAL AND FINANCIAL TAX SI	RVICES LLC			S.	20	
	(Firm Company)				24 D	Sh (r -
7550 FUTURES DRIVE SUITE 266				ETARY OF ST	2024 DEC -4	478.00 1] 1]
	(Address)			SSE \		
ORLANDO, FEORIDA 32819					PH 12: 53	\Box
	(City/ State and Zip Coc	le)			ទី	-
qualityfinancialtax@gmail.com						
E-mail address: (to be used	For future annual report	notification	n)			
For further information concerning this matter, please	call:					
VICTOR PAGAN			218-1500			
(Name of Contact Person) (A	rea Code)	(Daytime Telephone N	umber)		
Enclosed is a check for the following amount made p:	vable to the Florida Dep	arunent of	State:			
□ \$35 Filing Fee ■\$43 75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certif Certif	Teate of Status Ted Copy tional Copy is			
Mailing Address Amendment Section Division of Corporations P(O, Box 6327 Tallahassee, FL 32314	Amen Divisi The C 2415		orations 'allahassee e Street, Suite 810			

Articles of Amendment to Articles of Incorporation of

G-BISE CORP

(Name of Corporation as currently filed with the Florid	a Dept. of State)			
N24000014078				
(Document Nu	mber of Corporation (ičknown)	 tim ,	
Pursuant to the provisions of section 617,1000. Florida Stat amendment(s) to its Articles of Incorporation:	tutes, this <i>Florida Nol</i>	For Profit Corporation adopts the	e following	
A. If amending name, enter the new name of the corpo	<u>ration:</u>			
			The new	
name must be distinguishable and contain the word "corpe <u>"Company" or "Co." may not be used in the name</u>	pration" or "incorpor	ated" 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></u>)			
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)			2024 (SECR	ı.
D. <u>If amending the registered agent and/or registered on new registered agent and/or the new registered office</u>		ida, enter the name of the	ECRETINRY OF ST	
<u>Name of New Registered Agent</u>			PHI2: 53 OF STATE SEE, FL	\Box
No. Desta fritt fri		(Florida street address)	<u> </u>	
<u>New Registered Office Address</u> .				
	(City)	, Florida (Zip Code)		
<u>New Registered Agent's Signature, if changing Register</u> <i>I hereby accept the appointment as registered agent I an</i>		cept the obligations of the position.		

Signature of New Registered Agent, if changing

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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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each officeheld. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doc 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>X</u> .Remove <u>X</u> .Add	PT John D Y Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>CFO</u>	VICTOR M PAGAN	1807 CASTLETON DR SAINT CLOUD, FL, 34771
Remove 2) Change Add	CEO	DR CARLOS CALCADOR	IVANHOE WEST, BUILDING C UNITIO6
3) Remove 3) Change Add Remove		<u></u>	PEMBROKE PINES FL 33027
4) Change Add			PH 2:53
Remove			<u></u>
59 Change Add			
Remove			
 Change Add 	<u> </u>		
Remove			
E. <u>If amending or addi</u> (attach adduional shee	ng additional Art ets, if necessary)	i <mark>icles, enter change(s) here</mark> : (Re specific)	

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The date of each amendmen date this document was signed		, if other than the
Effective date if applicable:	10/18/2024	

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed 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.

DECEMBER 04, 2024 Dated Signature (By the charman or vice charman of the board, president or other officer-if directors have notheen selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary). Dr. Carlos Calcador (Typed or printed name of person signing)

CEO

(Title of person signing)

FILED ECRETARY OF STATE TALLAHASSEE. FL