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COVER LETTER

Division of Corporations
NAME OF CORPORATION: GEOFFREY RICHARDS SECURITIES CORP DOCUMENT NUMBER: PO200013127
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SEONG LEE Name of Contact Person GENTRE: RICHARDS SECURITIES CORP Firm/ Company 7570 S. FEDERAC Huy Swite 1 Address Hypowxo Fz 33462 City/ State and Zip Code Lee 37 e hotmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Seong Lee at (Sc1) 586 - 0800 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status \$43.75 Filing Fee Certificate of Status (Additional copy is enclosed) \$43.75 Filing Fee Certificate of Status (Additional copy is enclosed)
Mailing Address Street Address

TO: Amendment Section

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

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301

Articles of Amendment

Articles of Incorporation of

GEOFFREY RICHARDS SECUR	tly filed with the Florida Dept. of State)
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P02000013127	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation;	
	The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
word "chartered," "professional association," or the abbreviation	10 78
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	عند <u>ح</u>
	\
	1212 TO FULL
C. Enter new mailing address, if applicable:	//
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	<u> </u>
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent SEONG	LEE
7570 SFENER	AL HWY SKITE 1
New Registered Office Address: HypoLuxo	. Florida 33462 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiae	11: r with and accept the obligations of the position.
0	Λ
Sent	Lie
Signatury of New	Registred 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 = Trustce; 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.

X Change	PT John I	<u>Doe</u>				
X Remove	V Mike.	Mike Jones				
X Add	SV Sally S	<u>Smith</u>				
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s			
1) Change Add Remove	<u> </u>	GEOFFREY D. Linny	7570 SFEDERAL Huy Swite 1 Hypolingo Fe 33462			
2) Change Add		RICHARD A. FERAZI	7570 S FEDERAL HWY SUITE 1			
Remove 3) Change Add Remove	<u>P</u>	SEONGY. LEE	1570 S FEDERAL HUY SUITE 1 HYDRIKO FZ 33462			
4) Change Add Remove						
5) Change Add Remove						
6) Change Add						

amending or adding additional Art tuch additional sheets, if necessary).	(Be specific)		
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f an amendment provides for an ex provisions for implementing the an	nange, reclassification, or o	<u>:ancellation of issued si</u> the emendment livelf:	<u>liares.</u>
(if not applicable, indicate N/A)	noment o not contained in		•
(ij nai applicarie, mateure 1911)			

The date of each amendment(s) adoption: AUGUST 27", 2019
Effective date if applicable: AuGust 27th, 2019 (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 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 shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated August 27th, 2019
Signature (By a director, president or other officer – if directors or officers 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)