P0200090568

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

Office Use Only



800408251608

00.0000 0000 000 000000

2023 MAY -9 PH 1: 09 SECRETARY OF STATE TALLATIAN SEE, FL



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF C	CORPORA	ATION: GOLD'N DESIGN	INC					
		ER: P02000090568		****				
		f Amendment and fee are sul	omitted for filing.					
Please return	all corresp	ondence concerning this mat	ter to the following:					
	I	DAVID P KAATZ						
	Name of Contact Person							
	FLORIDA TAX CORPORATION							
	_		Firm/ Company	 				
	PO BOX 26251							
			Address					
	TAMARAC FL 33320							
			City/ State and Zip Code	:				
	anand@bcllsouth.net							
	_	E-mail address: (to be us	ed for future annual report	notification)				
For further in		concerning this matter, pleas	se call: at (. 735-7178				
	Name of	Contact Person	at (de & Daytime Telephone Number				
Enclosed is a		the following amount made						
■ \$35 Filin	ng Fee	☐\$43.75 Filing Fee & Certificate of Status	Cls43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810					
			Tallahassee, FL 32303					

Articles of Amendment to Articles of Incorporation of

GOLD'N DESIGN INC		
(Name of Corporation as currently	y filed with the Florida Dept, of State)	
P02000090568		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
	49	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	professional corporation name must contain the word	2023 HAY
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		رج ح
		PM 1: 09
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ATE	60
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida str	ect address)	
New Registered Office Address:	, Florida	
	(City) (Lip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v		
Signature of New R	egistered Agent, if changing	
Check if applicable		

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	р	SHAMSHA DHARAMDEO	6863 CALUMET CIR SEC
Add	, -	-	LAKE WORTH FL 33467
X Remove			100 m
2) Change	Т	DARSHANAND DHARAMDEO	6863 CALUMET CIR
Add			LAKE WORTH FL 33467
X Remove 3) Change	S	DEVANAND DHARAMENDEO	6863 CALUMET CIR
Add	.		LAKE WORTH FL 33467
X Remove	D	LALITA SINGHAL	6863 CALUMET CIR
4) Change		LALITA SINGHAL	
Add			LAKE WORTH FL 33467
X Remove			
5) Change			
Add			·
Remove			
6) Change			
Add			
Remove			

2023 MAY - 0 DM

1023 MAY -9 PH 1: no

	ption:	, 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 bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will artiment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and	d shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for the amendment(s) icient for approval.	2023 MAY SECRET
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	THULL OF STATE OF STA
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	PM 1: 09 (OF STAT SSEE, FL
by		
	(voting group)	: 09 TATE
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court of fiduciary by that fiduciary)	
۸	NAND DHARAMDEO	
_	(Typed or printed name of person signing)	
V	P	
-	(Title of person signing)	A-14