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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GLOBAL MONE	Y EXPRESS CORP.	······
DOCUMENT NUMB	P04000085720		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Niselio Garcia		
,		Name of Contact Person	1
	Global Money Express Corp.		
		Firm/ Company	
	1102 SW 8th St		
		Address	
	Miami FL 33 430		
		City/ State and Zip Code	<u> </u>
niselie	o.garcia@icloud.com		
	E-mail address: (to be us	sed for future annual report	notification)
		N	
For further information	n concerning this matter, pleas	se call:	
Niselio Garcia		at (<u>786</u>	620-9778
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 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, F1, 32314		Ameno Divisio Clitton 2661 E	Address Iment Section on of Corporations (Building Executive Center Circle assec, FL 32301

Articles of Amendment Articles of Incorporation of

Global Money Express Corp.		
(Name of Corporation a	is currently filed with the Florida Dept. of State)	
P04000085720		
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Staits Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the corpo	oration:	
	77	he new
name must be distinguishable and contain the word "c" Corp.," "Inc.," or Co.," or the designation "Corp," "word "chartered," "professional association," or the abbrashors.	corporation," "company," or "incorporated" or the abbr Inc," or "Co". A professional corporation name must con	reviation
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u> .	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		1
		NG F2
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the	
new registered agent and/or the new registered office	ce address:	
Name of New Registered Agent		AN IO
Name of New Negastrea Agent		55
	(Florida street address)	.
No. 10 miles and 170 ff and 171 feetings	, Florida	
New Registered Office Address:	(City) (Zip Coo	le)
	·	
New Registered Agent's Signature, if changing Registe	9-ed Agent:	
Thereby accept the appointment as registered agent. I an	in familiar with and accept the obligations of the position.	
Signatur	re of New Registered 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= 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	<u>PT</u>	John Doe		
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>	<u>Addres</u> s	
1) Change	VP	Miguel C. Jadzinsky	400 Sunny Isles Blvd. Apt. 1918	
X Add			Sunny Isles beach FL 33160	
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add			· · · · · · · · · · · · · · · · · · ·	
Remove				
6) Change				
, Add				
Remove				

Attach additional sheets, if necessary),	cles, enter change(s) here: (Be 'specific)		
		· · · · · · · · · · · · · · · · · · ·	-
		·—·	
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		<u></u>	
<u>If an amendment provides for an exch</u>	nange, reclassification, or canc	cellation of issued shares,	
provisions for implementing the ame	ndment if not contained in the	e amendment itself:	
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			-
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			

The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date,	1
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the ame sufficient for approval.	endment(s)
☐ The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The followin for each voting group entitled to vote separately on the amendmen	g statement u(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and share	holder
7/18/20	017	
Dated		
Signature		
	director, president or other officer – if directors or officers have ted, by an interporator – if in the hands of a receiver, trustee, or o	
	inted fiduciary by that fiduciary)	
	Delfina E. Lopez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	