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COR AMND/RESTATE/CORRECT OR O/D RESIGN GOOD TIME POOL, INC.

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: GOOD TIME POOL, INC. P04000098091 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **GILVAM F DOS SANTOS** Name of Contact Person GFS TAX & ACCOUNTING SERVICES Firm/ Company 11764 W SAMPLE RD STE 102 Address **CORAL SPRINGS FL 33065** City/ State and Zip Code INFO@GFSTAXACCT.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **GILVAM F DOS SANTOS** Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$52.50 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Page: 3 of 6

H220003358803

Articles of Amendment to Articles of Incorporation

GOOD TIME POOL, INC.			
(Name	of Corporation as current	ly filed with the Florida Dept, of State)	
P04000098091			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the follo	wing amendment(s) t
A. If amending name, enter the new n	ame of the corporation:		
			The new
	Corp," "Inc," or "Co".	'company," or "incorporated" or the abbrev A professional corporation name must cor "	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1290 S MILITARY TRAIL UNIT #413	
		DEERFIELD BCH FL 33442	
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1290 S MILITARY TRAIL UNIT #413	2072
		DEERFIELD BCH FL 33442	2 SEP
			in N
D. If amending the registered agent ar	nd/or registered office add	lress in Florida, enter the name of the	<u>ن</u> -
new registered agent and/or the ne	registered office addres	<u>\$:</u>	
			PH 12: 00 \$257 FÎ↓
Name of New Registered Agent	1290 S MILITARY TRA	IL UNIT #413	_ 0
	(Florida si	ree: address)	
New Registered Office Address:	DEERFIELD BCH	, Florida	.2
NEW REXISTERED OFFICE AUGUSTS.		(City)	Zip Code)
New Registered Agent's Signature, if a I hereby accept the appointment as registered.	hanging Registered Agen tered agent. I am familiar	t: with and accept the obligations of the positi	on.
	Signature of New I	Registered Agent, If changing	
Check if unalicable			

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

H220003358803

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)

Page: 4 of 6

Please note the officer/director title by the first letter of the office title:

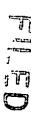
P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	P	LEONARDO NEVES	1290 S MILITARY TRAIL
Add			UNIT #413, DEERFIELD BCH
Remove			FL 33442
2) X Change	VP	ANDREIA K NEVES	1290 S MILITARY TRAIL
Add	_		UNIT #413, DEERFIELD BCH
Remove 3) Change		_	FL 33442
Add Remove 4) Change Add			2022 SEP 29 PA
Remove 5) Change Add			PH IZ: 00
Remove 6) Change Add			

E. If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)		
N/A			
			
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		7042 SEP	2
		35	;
F. If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,	29) . ']
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	~ · · · · · · · · · · · · · · · · · · ·	-
N/A		PM 12: 00 SEELFL	3
IVA			. •
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1.40			-
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			-
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Page: 6 of 6

H220003358803

The date of each amendment(s):	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this document's effective date on the E	slock does not meet the applicable statutory filing requespartment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	opted by the incorporators, or board of directors without	shareholder action and shareholder
The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for afficient for approval.	the amendment(s)
	proved by the shareholders through voting groups. The jeach voting group entitled to vote separately on the am	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
	ER 29, 2022	
Dated	ento hai Nos.	2022 SI
select	irector, president or other officer – if directors or officer d, by an incorporator – if in the hands of a receiver, trus	
ироз	ted fiduciary by that fiduciary) NEVES, LEONARDO	PH NO
	(Typed or printed name of person signing)	0
	PRESIDENT	0
	(Title of person signing)	