

PAGE Page 1 of 1

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(((H06000009992 3)))

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To:

Division of Corporations

Fax Number

: (850)205-0380

From:

Account Name

: REYNALDO H. GRINSTEIN

Account Number: I20040000171

Phone Fax Number : (904)779-2777 : (904)779-5088

COR AMND/RESTATE/CORRECT OR O/D RESIGN

GOIAS INC

Certificate of Status	0
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1/12/2006

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ARMOR INSURANCE WEST

PAGE 02

<u>COVER LETTER</u>

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GOIAS INC	
DOCUMENT NUMBER: <u>P05000144691</u>	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
REYNALDO GRINSTEIN	
(Name of C	Contact Person)
ARMOR INS AGENCY	
(Flm/	Company)
2631-A JAMMES RD	
(Ac	idress)
JACKSONVILLE FLORIDA 322	210
(City/ State	and Zip Code)
For further information concerning this matter, ple	ease call:
REYNALDO GRINSTEIN	at (904) 779-2777
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
☑ \$35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address 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	
to	
Articles of Incorporation	
of "	
a man. •	
GOIAS INC	
(Name of corporation as currently filed with the Florida Dept. of State)	
P05000144691	
(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation dopts the following amendment(s) to its Articles of Incorporation:	
NEW CORPORATE NAME (if changing):	
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A."))
MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC))
ADD:ERASMO FERNANDEZ LEITE,DIRECTOR,3355 CLAIRE LN SUITE 1605,JACKSONVILLE,FL 32223	٠.,
ADD:MARCILON CARNEIRO DA CUNHA,DIRECTOR,3355 CLAIRE LN SUITE 1605,JACKSONVILLE,FL 32223	06 JAN 12 P
	<u>ب</u>
(Attach additional pages if necessary)	H 3: 13

(#06 COCCO 999 2 3)

(H060000099923)

The date of each amendmen	t(s) adoption: 01-07-2006
Effective date if applicable:	01-07-2006
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
	was/were approved by the shareholders through voting groups. The at must be separately provided for each voting group entitled to vate amendment(s):
"The number o	f votes east for the amendment(s) was/were sufficient for approval by
	(voting group)
	was/were adopted by the board of directors without shareholder action was not required.
The amendment(s) shareholder action	was/were adopted by the incorporators without shareholder action and was not required.
Signature	Len
(By a select	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
ED	UARDO C DE SANTANA
	(Typed or printed name of person signing)
PR	ESIDENT
	(Title of rescon signing)

FILING FEE: \$35

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