## P06000036883

(R	Requestor's Name)	
(A	Address)	
Α)	Address)	
(0	City/State/Zip/Phon	e #)
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: olden Banch Inc Cldenranch & be Usarth. net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>786)</u> <u>256 - 2772</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section

TO: 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 Taliahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

10

GOLDEN RANCH INC

(Name of Corporation	on as currently filed	l with the Florida L	Dept. of State)	
P06000036883				
(Docun	ent Number of Corp	oration (if known)		
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florid</i>	la Profit Corporatio	n adopts the foll	owing amendment(s
A. If amending name, enter the new name of the co	orporation:			77
name must be distinguishable and contain the word "co "Inc" or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	" or "Co". A prof	ny," or "incorporato essional corporatio	ed" or the abbre n name must c	The new viation "Corp.," ontain the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				
	. <u></u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X</u> )			TWI.
D. If amending the registered agent and/or register new registered agent and/or the new registered		Florida, enter the	name of the	57.10: 5.
Name of New Registered Agent				
	(Florida street ada	tress)		
New Registered Office Address:			, Florida	
	(City)			(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		nd accept the obligat	tions of the posit	tion.
Signe	nture of New Register	red Agent, if changir	ng	
Check if applicable				

 $\square$  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 Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	<u>v</u>	_	JAVIER DORADO	5711 SW 196th Lane, Southwest R
X Add				
Remove				
2) Change		<del></del>		
Add				
Remove 3 ) Change	<del></del>	<del></del>		
Add				
Remove				
4) Change				
Add		<del></del>		
Remove				
5) Change				
Add	-			
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti- Attach additional sheets, if necessary).	(Be specific)
f an amondment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

date this document was signed.		, if other th	1110
sale tills doetiment i was signification			
Effective date <u>if applicable</u> :			
	(no more than 9	90 days after amendment file date)	
Note: If the date inserted in this blo locument's effective date on the Dep		licable statutory filing requirements, this date will not be listed	as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or	r board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adop by the shareholders was/were suf	· · · · · · · · · · · · · · · · · · ·	the number of votes cast for the amendment(s)	
	-	nrough voting groups. The following statement o vote separately on the amendment(s):	
"The number of votes east for	or the amendment(s) was/we	ere sufficient for approval	
bv			
	(voting group)	<del> </del>	
September I Dated	4th, 2020		
, ,	•	ficer – if directors or officers have not been the hands of a receiver, trustee, or other court	
	d fiduciary by that fiduciary		
(	leorgina Dorado		
<del>-</del>	(Typed or printed	d name of person signing)	
Γ	γŢ		

(Title of person signing)