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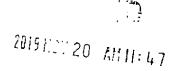
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The Guiding Lig	phthouse, Inc.				
DOCUMENT NUMBER: P07000002638					
The enclosed Articles of Amendment and fee are s	submitted for filing.				
Please return all correspondence concerning this m	natter to the following:				
Jackeline Contreras					
	Name of Contact Person				
The Guiding Lighthouse,					
	Firm/ Company				
4361 NW 205 ST					
	Address				
Miami Gardens/FL 33055	j 				
	City/ State and Zip Code				
contrerasjacquel@bellsouth.ne	et .				
E-mail address: (to be u	used for future annual report notification)				
For further information concerning this matter, please call:					
Jackeline Contreras	786 260 8491				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made	payable to the Florida Department of State:				
\$35 Filing Fee \$Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of



The Guiding Lighthouse, Inc.

(Name of Corporation as	s currently filed with the Florida Dept. of State)
	No. 1 CO CO
(Document r	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
name must be distinguishable and contain the word "co". "Corp.," "Inc.," or Co.," or the designation "Corp," "It word "chartered," "professional association," or the abbre	The new corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u>SS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the e address:
Name of New Registered Agent	
	Florida street address)
	. to ma up cer address,
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registere	ed Agent:
I hereby accept the appointment us registered agent. I am J	familiar with and accept the obligations of the position.
	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>\$V</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	CEO	Edgar J Lange	4361 NW 205 ST	
<u>×</u> Add			Miami Gardens	
Remove			FL 33055	
2) Change	С	Angelys J Centeno	18921 SW 30 ST	
x Add			Miramar	
Remove			FL 33029	
3) Change	С	Aneybis A Centeno	18921 SW 30 ST	
x Add			Miramar	
Remove			FL 33029	
4) Change				
Add				
Remove				
5) Change	-			
Add				
Remove				
6) Change				
Add			-	
Remove				

(Attach additional sheets, if necessary).	icles, enter change(s) here (Be specific)		
			
			
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			<u>.</u>
	-		
<u></u>			
If an amendment provides for an excl	hange, reclassification, or	cancellation of issued sha	res.
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained is	the amendment itself:	
atrocinio Centeno 20%			
dgar J Lange 15%			
agai a cange 1070			
ngelys J Centeno 7.5%			
ngelys J Centeno 7.5% neybis A Centeno 7.5%			
ngelys J Centeno 7.5%			
ngelys J Centeno 7.5%			

11/13/19
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)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
11/13/19
DatedSignature
(By a director, president or other officer if directors or officers have not been
selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Jackeline Contreras
(Typed or printed name of person signing)
<u>U'resident</u>
(Title of person signing)