## P10000060744

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	<del>:</del> #)
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## **COVER LETTER**

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TO: Amendment Secti				38 86
Division of Corpo	orations			<b>0</b>
NAME OF CORPOR	<del></del>	(Investma)	+ Coolty, Cap	三 美 報
DOCUMENT NUMB	BER: P10000	060744		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		•
Please return all corres	pondence concerning this ma	itter to the following:		
	<u> </u>	L GI roux		
•		Name of Contact Perso	<del></del>	
	Giranx Ir	vestmat (	Sentu Caro	
•		Firm/ Company		
	2234 Nov	th Federal K	Jihway # 1102	
	0	Address		
	15 oca Kat		3431	
		City/ State and Zip Cod	le •	
	int	ce siscurion	Huccom	
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	concerning this matter, plea	se call:		
Name o	of Contact Person	at ( Area Co	)ode & Daytime Telephone Number	<del></del>
			•	
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee	
	Certificate of Status	Certified Copy	Certificate of Status	
		(Additional copy is enclosed)	Certified Copy (Additional Copy	
		enclosed (	is enclosed)	
Mail	ling Address	Straat	Address	
	ndment Section		dment Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## Articles of Amendment

to

	Articles of Incorpo	ration		en en
Giroux I	Leamborn	Zealty, Lo	scp	23
	orporation as currently file	d with the Florida De	ept. of State)	The second second
P10000	00 60744			
	(Document Number of Corp	poration (if known)		•
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, this <i>Flori</i>	da Profit Corporation	adopts the following	amendment(s) to
A. If amending name, enter the new name	of the corporation:			
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	Corp." "Inc." or Co".	A professional corpo	porated" or the ab	
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>				
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF				
D. If amending the registered agent and/or new registered agent and/or the new reg		n Florida, enter the na	ame of the	
Name of New Registered Agent				
_	(Florida street ad	dress)		
Non-Bosinson J. Office A. Ideans			Florida	
New Registered Office Address:	(City)		Fiorida(Zip Co	ode)
New Registered Agent's Signature, if chang I hereby accept the appointment as registered		nd accept the obligation	ons of the position.	
-	Signature of New Registe	ered Agent, if changins		

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	MBR	LUL GIROUX	Same.
Add			
_ <b>X</b> Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	···	<del></del> .	
Remove			-

	icles, enter change(s) her (Be specific)	-	
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		Vol. 25	
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	ange, reclassification, or	cancellation of issued share	<u>.</u>
If an amendment provides for an exc			
If an amendment provides for an exclusions for implementing the amed (if not applicable, indicate N/A)	ndment if not contained	in the amendment itseit:	
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	in the amendment itself:	
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The date of each amendment(s) ad date this document was signed.	option: 9/12/2018	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file de	ate)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirem partment of State's records.	ients, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the a ficient for approval.	amendment(s)
	oved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda	
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and	d shareholder
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and sha	areholder
DatedSignature	12/2018	
selected	rector, president or other officer — if directors or officers have, by an incorporator — if in the hands of a receiver, trustee, or diduciary by that fiduciary)	
_	John Henthorn	
	(Typed or printed name of person signing)	
	V.P.	
<del>-</del>	(Title of person signing)	