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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: GBOX USA C	CORP.
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
GINETTE GUTIERREZ	
	Name of Contact Person
GBOX USA CORP.	
	Firm/ Company
2227 NW 79 AVE.	
·	Address
MIAMI, FLORIDA 3319	88
	City/ State and Zip Code
GINETTEKG@GBOXUSA.CO	ОМ
E-mail address: (to b	e used for future annual report notification)
For further information concerning this matter, p	please call:
GINETTE GUTIERREZ	at (305 ) 5288643
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
\$35 Filing Fee Certificate of Statu	
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** Articles of Incorporation of

	GBOX USA CORP		
(Name of Corporation	on as currently filed with the Flor	ida Dept. of State)	· <del>- · · · · · · · · · · · · · · · · · ·</del>
(Docum	ent Number of Corporation (if know	vn)	1
ursuant to the provisions of section 607.1006, Florida s Articles of Incorporation:	Statutes, this Florida Profit Corpo	ration adopts the follow	ving amendment
. If amending name, enter the new name of the con	rporation:		
ume must be distinguishable and contain the word Corp.," "Inc.," or Co.," or the designation "Corp, ord "chartered," "professional association," or the c	" "Inc," or "Co". A professional	"incorporated" or the corporation name mu.	The new abbreviation st contain the
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u>			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX  If amending the registered agent and/or registered new registered agent and/or the new registered of the new registered agent and/or the new registered agent and/or the new registered of the new registered agent and/or the new regist	ed office address in Florida, enter	the name of the	
	mice audress.		_
	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Zi	p Code)
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent:   am familiar with and accept the ob   attack the standard st	SEGRETAL AHA	

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> <u>Johr</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>s</u>	Reyna Godoy	8070 NW 10 Street #2
Add			Miami, florida 33126
x Remove			
2) x Change	v	Ginette Gutierrez	701 brickell key #2112
Add			Miami, florida 33131
Remove			
3) Change			
Add			
Remove			<del> </del>
4) Change			
Add			
Remove			
5) Change		····	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nament it not contained in the amendment usen:
	•

The date of each amendment(s) a	January 4, 2017	, if other than the
date this document was signed.	aoption.	, n omer man me
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendmer afficient for approval.	ıt(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	lder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
January 4, Dated	2017	
Signature	Auth Berry	
(By a d selecte	irector, president or other officer - if directors or officers have not bee d, by an incorporator - if in the hands of a receiver, trustee, or other co	n Surf
appoin	ted fiduciary by that fiduciary)	7411
	Ginetle Gutierrez	
	(Typed or printed name of person signing)	
	VICe-President.	· · · · · · · · · · · · · · · · · · ·
	(Title of nercon signing)	