Office Use Only



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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: SUNSHINE	E GLOW INT'L, I	NC	
	_{R:} P1200001299			
	Amendment and fee are su			
Please return all correspo	ondence concerning this ma	tter to the following:		
Ĺ	inda Morales			
_	·	Name of Contact Person	1	
		Firm/ Company		
3	00 W. Palmetto	Park Rd. #A-20	9	
		Address		
<u> </u>	oca Raton FL 3			
		City/ State and Zip Cod	e	
mora	leslinda212@gr			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information c	oncerning this matter, pleas	se call:		
Linda Morales		_{at (} 561	、352.6281	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	g Address	Street Address		
	Iment Section	-	ment Section	
Division of Corporations P.O. Box 6327			Division of Corporations Clifton Building	
Tallahassee, FL 32314			xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED!

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SUNSHINE GLOW INT'L, INC	\$10057777777
(Name of Corporation as currently filed with the Fl	orida Dept. of State) And State Pl (1910)A
P12000012995	- Control of Control
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
GLOBAL SOLUTIONS SERVICES, INC	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	300 W. Palmetto Park Rd.
(Principal office address MUST BE A STREET ADDRESS)	#A-209
	Boca Raton FL 33432
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	
	100-100-100-100-100-100-100-100-100-100
(Florida stre	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	

Signature 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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		-	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
[]			
6) Change			
Add			
Remove			

	ets, if necessary).	(Be specific)	. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
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To a section of the s							
							
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<u>,</u>							
			ion, or cancellati	on of issued shares			
If an amendment pro	vides for an exch	ange, reciassificat	Ond or contection	1 4 14 16	4		
<u>provisions for imple</u>	menting the amer	ange, reciassificat adment if not con-	tained in the ame	ndment itself:	1		
If an amendment proprovisions for imple	menting the amer	ange, reciassificat	tained in the ame	ndment itself:	.		
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If an amendment proprovisions for imple (if not applicable	menting the amer	ange, reciassificat	tained in the ame	ndment itself:			
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provisions for imple	menting the amer	ange, reciassificat	tained in the ame	ndment itself:			

The date of each amendment(s) ac date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	12/10/14	
Signature	Anda Moralis	
	rector, president or other officer - if directors or officers have not been	_
	d, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoint	ed fiduciary by that fiduciary)	
	Linda Morales	
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	