

P12000015870

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

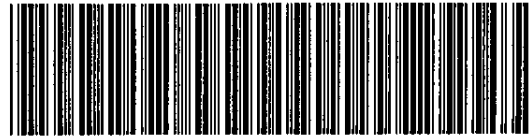
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800230082558

04/20/12--01023--029 **43.75

FILED
12 APR 20 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 23 2012

C. MUSTAIN

*And
for*



 **WASERSTEIN NUNEZ & FOODMAN**

April 19, 2012

VIA FEDERAL EXPRESS

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

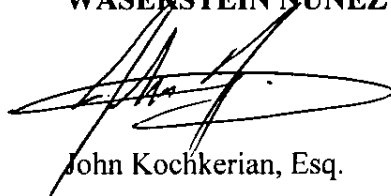
Re: Global Services GS, Inc.

Dear Sir or Madam:

Enclosed please find the Articles of Amendment to Articles of Incorporation of Global Services GS, Inc. for filing. Please note that these Articles are filed to amend the titles of the officers. Also enclosed, please find a check made payable to the Florida Department of State in the amount of \$43.75. Should you have any questions please do not hesitate to contact me.

Sincerely,

WNF LAW PL, a Florida Professional limited liability company
WASERSTEIN NUNEZ & FOODMAN

A handwritten signature in black ink, appearing to read "John Kochkerian", is written over a horizontal line.

John Kochkerian, Esq.

Enclosures
JK/vm

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GLOBAL SERVICES GS, INC.

DOCUMENT NUMBER: P12000015870

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOHN KOCHKERIAN

Name of Contact Person

WNF LAW P.L.

Firm/ Company

201 S. BISCAYNE BLVD., 34TH FLOOR

Address

MIAMI, FL 33131

City/ State and Zip Code

JK@WNFLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN KOCHKERIAN

Name of Contact Person

at (305) 760-8517

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

GLOBAL SERVICES GS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000015870

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

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 in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street 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 with and accept the obligations of the position.

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:

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change ___ Add ___ Remove	<u>D</u>	<u>MICHEL KUIJLAARS</u>	<u>5201 BLUE LAGOON DRIVE</u> <u>STE. 320</u> <u>MIAMI, FL 33126</u>
2) <u>X</u> Change ___ Add ___ Remove	<u>P</u>	<u>THOMAS P. BROWNE</u>	<u>5201 BLUE LAGOON DRIVE</u> <u>STE. 320</u> <u>MIAMI, FL 33126</u>
3) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____
4) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____
5) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____
6) ___ Change ___ Add ___ Remove	_____	_____	_____ _____ _____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: _____

2/15/12

Effective date if applicable: _____

2/15/12

(no more than 90 days after amendment file date)

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.

Dated _____

4/12/12

Signature _____

(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)

Michiel Kuijlaars

(Typed or printed name of person signing)

Director

(Title of person signing)