## P12000001941

(Ře	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	<del>;</del> #)
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12 SEP 24 FN 2: 36

Amendica

## **COVER LETTER**

TO: Amendment Sec Division of Corp	<b></b>		
NAME OF CORPO	RATION: G's Platfo	rm	
DOCUMENT NUM	BER: P120000619	341	
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Lydia L. Jackso		
	C'a Blatform	Name of Contact Person	1
	G's Platform	F: / C	
	705 Macala Dr	Firm/ Company	
	705 Masala Dr,	Address	
	Orlando, FL, 32		
		City/ State and Zip Code	3
lvc	liaj@godsplatfoi	rm.ora	
<u>.,, -</u>		ed for future annual report	notification)
For further information	on concerning this matter, please	e call:	
Lydia L. Ja	ckson	at (407	616-0881 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	ayable 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)
	iling Address		Address
Amendment Section Amendment Section Division of Corporations Division of Corporations			
P.O	P.O. Box 6327 Clifton Building		
Tal	lahassee, FL 32314		xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

G's Platform   W				
(Name of Corporation as cur	rently filed with the Flo	orida Dept. of State)		
P12000061941				
(Document Nu	mber of Corporation (if	known)		
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	6, Florida Statutes, this F	<i>llorida Profit Corporation</i> adoç	ots the following	; amendment(s) to
A. If amending name, enter the new name of N/A	of the corporation:			Tl
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	ı "Corp," "Inc," or "C	Co". A professional corporation	ited" or the ab	
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>	plicable:	N/A		32 SE
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		N/A		P 24 PH 2: 36
D. If amending the registered agent and/or new registered agent and/or the new reg	gistered office address:	ess in Florida, enter the name	of the	
Name of New Registered Agent				
	(Florida stre	et address)		
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if chang I hereby accept the appointment as registered	ting Registered Agent: agent. I am familiar w			
Signati	ure of New Registered Ag	gent, 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.

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) X Change	SV	Cornelius W Jackson	705 Masala Dr.
Add			Apt. G
Remove			Orlando, FL 32818
2) Change			
Add			
Remove			
3 ) Change			
Add			·
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			
Add		_	
Remove			
6) Change			
Add			
Remove			

(Attach additiona	adding additional Article I sheets, if necessary). (	Be specific)	<del>-</del>	
N/A				
				·
			•	
<del></del>				
	· · · · · · · · · · · · · · · · · · ·			
F. <u>If an amendmen</u>	t provides for an exchan	ge, reclassification, or	cancellation of issued s	shares,
<u>provisions for i</u> ( <i>if not appli</i>	mplementing the amend icable, indicate N/A)	ment if not contained i	n the amendment itself	<u>:</u>
N/A				
<u>_</u>				
	_			

The date of each amendment(s) a	adoption: 9/13/2012
Effective date <u>if applicable</u> : 9/	13/2012
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes case	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.  The amendment(s) was/were ad	lopted by the board of directors without shareholder action and shareholder
action was not required.	
selecte	2012  Mus L. Jackson  Airector, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Lydia L. Jackson
	(Typed or printed name of person signing)
	President
	(Title of person signing)