P13000013284

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(City/	State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SMART GAWDIE	CORP	
	BER: P13000013284		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	LEGNE LIMA		•
		Name of Contact Person	1
		Firm/ Company	
	3221 SW 107 AVE		
		Address	
	MIAMI, FL 33165		
		City/ State and Zip Cod	e
INFO	@MEETJAVIER.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
JAVIER MONTES		at (305	de & Daytime Telephone Number
Name	of Contact Person	. Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the 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)
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

SMART GAWDIE CORP			
(Name	of Corporation as curren	tly filed with the Florida De	ept. of State)
P13000013284			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation	adopts the following amendment(s
A. If amending name, enter the new n	ame of the corporation:		•
MEET JAVIER CORP			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc," or	"Co". A professional corpo	porated" or the abbreviation
B. Enter new principal office address,	if annicable:	3221 SW 107 AVENUE	· 差差
(Principal office address MUST BE A S		MIAMI, FL 33165	55 P
	C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		MIAMI, FL 33165	
D. If amending the registered agent an new registered agent and/or the ne	w registered office addre		ame of the
Name of New Registered Agent	JAVIER MONTES		
	3221 SW 107 AVENUE	·	
		street address)	
New Registered Office Address:	MIAMI		, Florida
		(City)	(Zip Code)
New Registered Office Address: New Registered Agent's Signature, if o	MIAMI	(City)	, Florida
I hereby accept the appointment as regis			ons of the position.
	AM		
	Signature of New	Registered Agent, if changing	g

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>	Name	Address				
1) Change	P	LEGNE LIMA	3909 ALHAMBRA COURT				
Add X Remove			MIAMI, FL 33134				
2) Change	P	JAVIER MONTES	3221 SW 107 AVENUE				
X Add			MIAMI, FL 33165				
Remove							
3) Change							
Add							
Remove							
4) Change							
Add							
Remove							
5) Change							
Add							
Remove							
6) Change	 						
Add							
Remove							

Attach <i>addi</i>	tional sheets i						
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lf an amend	lment provide	es for an excl	nange, reclassif	ication, or canc	ellation of issued	l shares,	
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provisions	for implemen	iting the ame	nange, reclassif indment if not o	ication, or cancontained in the	amendment itse	elf:	

The date of each amendment(s) adoption:, if o	ther than the
date this document was signed. ' 01/01/2017 Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	_
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
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.	
01/01/2017	
DatedSignature	
(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)	
LEGNE LIMA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	