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SEP 30 2019 C Kinsey

## COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: LAYPAM CORP DOCUMENT NUMBER: P13000040607 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FELIX RIVERO Name of Contact Person LATINO TAX EDUCATION CENTER INC Firm/ Company 3105 NW 107TH AVE, SUITE 500 Address MIAML FLORIDA, 33172 City State and Zip Code globallyconsultingilc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number **FELIX RIVERO** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 f Ting Fee & □\$43,75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Fallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

		Articles of In	-	
LAYPAM CORP		la		
—	(Name)	Companion a manage	lu Etud mich thu Clorida Dant al	(Central)
P13000040607	(:Name	or Corporation as current	ly filed with the Florida Dept. o	<u>i State</u> )
	· · · · · · · · · · · · · · · · · · ·	(Document Number of	of Corporation (if known)	
			•	
Pursuant to the pro- its Articles of Incor		.1006, Florida Statutes, this	Florida Profit Corporation adop	ts the following amendment(s)
A. If amending na	 ame, enter the new n	ame of the corporation:		
GLOBALLY BUY	CORP			The new
"Corp.," "Inc.," a	ir Co.," or the design		n "company," or "incorporal "Co". A professional corporatio "P 1"	ted" or the abbreviation
B. Enter new prin	icipal office address,	if applicable:	NOT APPLICABLE	
	ddress <u>MUST BE 4 S</u>			(0. N
				S S
	iling address, if appl		NOT APPLICABLE	20
(Mailing addre	ss <u>MAY BE A POST</u>	<u>OFFICE BOX</u> )		
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'	l			
D. If amending th	! le registered agent an	ul/or registered office add	ress in Florida, enter the name o	of the
		w registered office address		<del>n the</del>
Name of N	i <u>'ew Registered Agent</u>	NOT APPLICABLE		
		NOT APPLICABLE		
		Glorida st	reet addressi	<del></del>
<u>New Registered Office Address:</u>		NOT APPLICABLE	FI	lorida
			( 'my	(Zip Code)
New Registered A	i Jant's Signature if c	hanging Registered Agent		
			<u>::</u> with and accept the obligations of	Tthe position
j	1			
1	<del></del>	Signature of New I	Registered Agent, if changing	
			A STATE OF THE STA	

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.

 $P = President; V = Vice President; T - Treasurer; S - Secretary; D - Director; TR + Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer <math>A_i^2$  an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be P(D).

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 Jol</u>	hr. Dog	
X Remove	<u>V</u> <u>M</u> i	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Snoth	
Type of Action (Check One)	<u>. Fitle</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change	<del></del>		-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		***************************************	
Remove			
Remove			

E. If amending o	r adding additional Articles, enter change(s) here: had sheets, if necessary), (Be specific)
NOT APPLICAB	
	<u></u>
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	<del>:</del>
	i
F. If an amendm provisions fo	ent provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself:
(if not ap	plicable, indicate N=1)
NOT APPLICAB	џе
	<u> </u>

### Signature    District of the date   District of the amendment   District of the am	The date of each amendment(s) ac	109/01/2019 Toption:	, if other than the
Effective date if applicable:	date this document was signed.	117016	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Adoption of Amendment(s)  The amendment(s) was were adopted by the shareholders. The number of votes east 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 ontified to vote separately on the amendment(s):  "The number of votes east for the amendment(s) was/were sufficient for approval by		01/2019	
document's effective date on the Department of State's records.  Adoption of Amendment(s) (CHECK ONE)  The amendment(s) was/were adopted by the shareholders. The number of votes east 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 east for the amendment(s) was/were sufficient for approval by		tno more than 90 days after amendment file date)	
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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	Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
"The number of votes cast for the ameadment(s) was were sufficient for approval by			s)
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  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)  MONICA R. DIAZ.  (Typed or printed name of person signing)  SECRETARY	☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	rnt
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  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)  MONICA R. DIAZ  (Typed or printed name of person signing)  SECRETARY	"The number of votes cast	for the amendment(s) was were sufficient for approval	
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The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.    Dated	-	(voting group)	
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)  MONICA R. DIAZ  (Typed or printed name of person signing)  SECRETARY	action was not required.  The amendment(s) was/were ado		r
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(Typed or printed name of person signing) SECRETARY	(By a di selected	I, by an incorporator - if in the hands of a receiver, trustee, or other court	1
SECRETARY		MONICA R. DIAZ	
		(Typed or printed name of person signing)	
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