

P14000001221

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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(((H24000132566 3)))



H240001325663ABCS

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : R&P ACCOUNTING AND TAXES INC
Account Number : I20170000090
Phone : (305)358-1310
Fax Number : (305)503-6701

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: *arod0723@gmail.com*

2024 APR 16 AM 7:45
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CORPORATE
DIVISION
TALLAHASSEE, FL

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
GLOVAL I.P.G. DEVELOPMENT CORP.**

Certificate of Status	0
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Page Count	04
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*IS. HUNT
04/16/24*



April 12, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GLOVAL I.P.G. DEVELOPMENT CORP.
8645 SW 185 STREET
CUTLER BAY, FL 33157

SUBJECT: GLOVAL I.P.G. DEVELOPMENT CORP.
REF: P14000004621

APR 15 2024 AM 7:45
STATE OF FLORIDA
TALLHASSEE, FL
ED

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

RUSSELL L HUNT
Regulatory Specialist III

FAX Aud. #: H24000132566
Letter Number: 824A00007992

Articles of Amendment
to
Articles of Incorporation
of

GLOVAL I.P.G. DEVELOPMENT CORP.

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

P14000004621

(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:

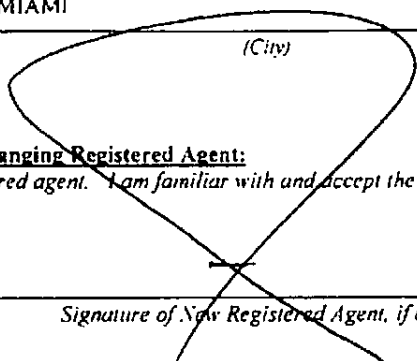
Name of New Registered Agent R&P ACCOUNTING & TAXES INC
150 SE 2ND AVE STE 404
(Florida street address)

New Registered Office Address: MIAMI, Florida 33131
(City) (Zip Code)

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FLORIDA DEPT. OF STATE
CORPORATION SERVICES
FILED

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

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (1) (c), F.S.

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:

- Change PT John Doe
- Remove V Mike Jones
- Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input checked="" type="checkbox"/> Change	<u>P</u>	<u>CARLOS ARELLANO</u>	<u>13012 SW 128 ST</u>
<input type="checkbox"/> Add			<u>MIAMI, FL 33186</u>
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>S</u>	<u>PATRICIA VASQUEZ</u>	<u>13012 SW 128 ST</u>
<input type="checkbox"/> Add			<u>MIAMI, FL 33186</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

APR 16 2024
 5 AM 7:45
 DEPT OF STATE
 MIAMI, FL 33133

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 listed as the document's effective date on the Department of State's records.

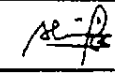
Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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)

Dated 04/10/2024 _____

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)

CARLOS ARELLANO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

DEPARTMENT OF STATE
 TALLAHASSEE, FL
 APR 16 2024 7:45 AM
 ED