## P140001835

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: EASTERN POLE HOLDING INC DOCUMENT NUMBER: P14000007825 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **GERRY MUJICA** Name of Contact Person GREENLIGHT FINANCIAL LLC Firm/ Company 5301 BLUE LAGOON DR, STE 180 Address MIAMI, FL 33126 City/ State and Zip Code GMUJICA@GREENLIGHTFINANCIAL.NET E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 ) 860-5970 Area Code & Daytime Telephone Number **GERRY MUJICA** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$52.50 Filing Fee **\$35** Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

17 APR -7 PH 12: 21

EASTERN POLE HOLDING INC	OI	ž <u>ú</u>	Carlo Control Control Control
(Name of	Corporation as current	ly filed with the Florida	Dept. of State)
P1400007825			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporati	ion adopts the following amendment(s) to
A. If amending name, enter the new nam	e of the corporation:		
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designal word "chartered," "professional association	tion "Corp." "Inc," or "	'Co". A professional co "P.A."	rporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		6402 NW 82ND AVI	
		MIAMI, FL 33165	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6402 NW 82ND AVI	<u> </u>
		MIAMI, FL 33165	
D. If amending the registered agent and new registered agent and/or the new	or registered office add registered office address	ress in Florida, enter the	e name of the
Name of New Registered Agent	GREENLIGHT FINANC	IAL LLC	
	5301 BLUE LAGOON D	R, STE 180	
_	(Florida sti	reet address)	
New Registered Office Address:	MIAMI		, Florida
		(Chy)	(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.

X Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change			·
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Řemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach additional sheets,	if necessary). (Be sp	ter change(s) here: pecific)		
			<del>, , , , , , , , , , , , , , , , , , , </del>	
			<u></u>	
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f an amendment provid provisions for impleme (if not applicable, in	nting the amendmen	reclassification, or c t if not contained in	nncellation of issued the amendment itself	shares. !
		<u></u>		
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				<del></del>

	ption:, if other than th
date this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as the trument of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):
	the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not regulred.	ed by the incorporators without shareholder action and shareholder
03/28/2017	
Dated	
Ci	1 Mms
Signature	ctor, president or other officer if directors or officers have not been
selected, b	by an incorporator - if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
W	ORLDWIDE TRADING HOLDING INC
	(Typed or printed name of person signing)
PR	ESIDENT
<del>-</del>	(Title of person signing)