## P14000009a65

(Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	e #)
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FILED

2024 DEC -3 PM 6: 03

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GC SERVICES I	ENTERPRISES INC			
DOCUMENT NUMBER: P14000009265				
The enclosed Articles of Amendment and fee are s	submitted for filing.			
Please return all correspondence concerning this n	natter to the following:			
MAYRA MARTINEZ				
	Name of Contact Person			
GC SERVICES ENTERPR	GC SERVICES ENTERPRISES INC.			
	Firm/ Company			
14619 SW 99 STREET				
	Address			
MIAMI FLORIDA 33186	MIAMI FLORIDA 33186			
	City/ State and Zip Code			
TOPCRAFTS@COMCAST.NET				
E-mail address: (to be	used for future annual report notification)			
For further information concerning this matter, ple	ease call:			
MAYRA MARTINEZ	at ( 7863995190 )			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made	e payable to the Florida Department of State:			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment

2024 DEC-3 PHE Articles of Incorporation of

		0.0
(Name of	Corporation as currer	ntly filed with the Florida Dept. of State)
P1400009265		Print.
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na-	me of the corporation:	
		The new
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered," "professional association," o	orp," "inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp"  A professional corporation name must contain the word  1."
B. Enter new principal office address, if		
(Principal office address <u>MUST BE A ST</u>	<u>REET ADDRESS</u> )	N/A
C. Enter new mailing address, if applic		N/A
(Mailing address <u>MAY BE A POST O</u>	FFICE BON	
<ul> <li>If amending the registered agent and new registered agent and/or the new</li> </ul>	l/or registered office ad	dress in Florida, enter the name of the
		.331
•	N/A	
•	N/A 	<del></del>
	N/A	
		street address)
Name of New Registered Agent		street address)

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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.

X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	CFO	DANNY CRESPO	8351 SW 4 STREET
X Add	<del></del>		MIAMI FL 33144
Remove	CEO	ILDELIS ALVAREZ	8843 SW 36 ST
2) Change X Add			MIAMI FL 33165
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<del></del>	
Add			
Remove			

	ets, if necessary).	(Be specific)			
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an amendment pro	vides for an exch:	ange, reclassification	on, or cancellation	or issued shares,	
rovisions for imple	menting the amer	dment if not conta	mea in the amena	ment usen:	
(if not applicable	, maicaie (N/A)				
	<del>-</del>				
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The date of each amendment(s	adoption:	, if other than the
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 thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment sufficient for approval.	nt(s)
☐ The amondment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
sele	a director, president of other officer – if directors or officers have not bee eted, by an incorporator – if in the hands of a receiver, trustee, or other continted fiduciary by that fiduciary)	n purt
	MAYRA MARTINEZ	<del></del>
	(Typed or printed name of person signing)	
	PRESIDENT	<u> </u>
	(Title of person signing)	

A Company of the Company