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Jun²⁹ 2017 Jun²⁹ 2017 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPORATION: Gil Delgado Building in	16.			
OCUMENT NUMBER: P1400095825				
The enclosed Articles of Amendment and fee are submitted for filing.				
lease return all correspondence concerning this matter to the following:				
Cil Delpado Bundayson Name of Contact Person Gil Delpado Bulding inc. Pirm/Company Bod St. Beth Court Address Port St. Luciu Fl 34984 City/ State and Zip Code	<u> </u>			
E-mail address: (to be used for future annual report notification)				
or further information concerning this matter, please call:				
Name of Contact Person at (\$28) 707- Name of Contact Person Area Code & Daytime Telep	J200 ohone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)	tatus			
Mailing Address Street Address				

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation 17 JUNI 20 APAIR 14
of · · · · · · · · · · · · · · · · · · ·
(oil Delgado Fullding FAC
(Name of Corporation as currently filed with the Florida Dept. of State)
GII Del gado Building inc. 7140000 95825 (Document Number of Corporation (if known)
(Document Number of Corporation (it known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> 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 Sally Del gado
603 SE Beth Court
(Florida street address)
New Registered Office Address: VOC+S+. LUCIE, Florida 39984
(City) (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.
- Dalli Vel no sto
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	V Mike Jones	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P Sally Delgado	603 SE Beth Court
Add	, J	Port St Lucre
Remove	_	FL. 34984
2) Change	P Gil Dolgado	603 SE Beth Court
Add	•	Port St. Lucie
Remove		FL 34984
3) Change		
Add		-
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

Attach addition	or adding additional A conal sheets, if necessary	v). (Be specific)			
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provisions fo	nent provides for an e or implementing the a oplicable, indicate N/A	mendment if not	ification, or cand contained in the	ellation of issued amendment itsel	<u>shares,</u> <u>f:</u>	

(no more than 90 days after amendment file date)

Note: If the date inserted in this block of document's effective date on the Department	oes not meet the applicable statutory filing requirements, this date will not be listed as the ent of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
• • • • • • • • • • • • • • • • • • • •	by the shareholders through voting groups. The following statement 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 be action was not required.	y the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	by the incorporators without shareholder action and shareholder
Dated	19-2017
selected, by a	president or other officer – if directors or officers have not been in incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)
	(Typed or printed name of person signing)
	President (Title of person signing)