## P1500000 5489

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GOAL DIGGERZ	, INC	
DOCUMENT NUMBI	ER: P15000005489		,
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
k	(AMARA STOKES		
_		Name of Contact Person	n
C	SOAL DIGGERZ, INC		
_	· ·	Firm/ Company	
1	031 IVES DAIRY RD #13	2	
-		Address	
V	MAMI, FL 33169		
_		City/ State and Zip Cod	e
K	AMARASTOKES@GMA	IL.COM	
_	E-mail address: (to be us	sed for future annual report	notification)
For further information KAMARA STOKES	concerning this matter, pleas	305	796-7182
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number
	the following amount made		•
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

## **Articles of Amendment** Articles of Incorporation

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GOAL DIGGERZ, INC

(Name of Corporation as curren	tly filed with the Florida Dept, of State)		
P15000005489			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation: KAPITOL SOLUTIONS, INC			
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	1031 Ives Dairy Road		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Suite 132		
	MIAMI, FL 33179		
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 adnew registered agent and/or the new registered office address			
Name of New Registered Agent			
tFlorida s	treet address)		
New Registered Office Address:	City (Zip Code)		
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	<u>nt:</u>		
Signature of New	Registered Agent, if changing		

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)

Example:

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> 61</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	Р	Esquilin, Danielle	1031 Ives Dairy Road	
Add			Suite 132	
X Remove			MIAMI, FL 33179	
2) Change	Р	STOKES, KAMARA	1031 Ives Dairy Road	
X Add		-	Suite 132	
Remove 3 ) Change			MIAMI, FL 33179	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

	ling or adding ad Aditional sheets, i	f necessary). (	Be specific)			
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f an ame	endment provide	es for an exchan	ge, reclassificat	ion, or cancellat	ion of issued sha	res,
<u>provisio</u> (if n	ons for implement not applicable, inc	<u>iting the ameno</u> dicate NA)	ment it not cont	aineg in the ami	enament itseit:	
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05/05/20
The date of each amendment(s) adoption:
date this document was signed.
05/05/20 Effective date <u>if applicable</u> :
(no more than 90 days after amendment file date)
<b>Note:</b> 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  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)
KAMARA STOKES
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)