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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	GOLDEN TEC T ION:	H GROUP INC	
	P150000642		
DOCUMENT NUMBER	l:		
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspor	ndence concerning this ma	tter to the following:	
	AlDA	M GARRIDO	
	MERO	Name of Contact Person CY ACCOUNTUNG SYST	
	730	Firm/ Company 09 NW 173 DR UNIT 104	
_	HIAI	Address LEAH, FL 33015	
_		City/ State and Zip Cod	e
	MGARRIDOTAXS	SERVICES@GMAIL.COM	1
	E-mail address: (to be u	sed for future annual report	notification)
	L-man address. (to be di	sed for future aimuat report	notification
For further information co	ncerning this matter, pleas	se call:	
MERCY GARRIDO		305	322-9520
Name of C	ontact Person	at (Area Co) de & Daytime Telephone Number
Traine of C	onact i croon	Airea Co	nde de Baytime Telephone Pamoer
Enclosed is a check for the	e following amount made	payable to the Florida Depa	artment of State:
□ \$35 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)
	Address		Address
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton	Building
Tallahas	ssee, FL 32314		Executive Center Circle
		Tallaha	assee, FL 32301

Articles of Amendment to Articles of Incorporation of

GOLDEN TECH GROUP INC

	on as currently to 5000064219	<u>ed with the Florida De</u>	ept. of State)	
(Docum	nent Number of Co	rporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Flo</i>	rida Profit Corporation	adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the co	rporation:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	" "Inc." or "Co"	'. A professional corpe	porated" or the oration name mus	abbreviation st contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				
(Frincipal office address most be A STREET ADD	<u> </u>	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)			
D. If amending the registered agent and/or register new registered agent and/or the new registered of		in Florida, enter the n	ame of the	
Name of New Registered Agent				
				්යිකුල් ලක්
	(Florida street a	ddress)		
New Registered Office Address:			Florida	<u> </u>
	(Cit	·)	(Zi _l	p Code) j.
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.	l am familiar with			·.
Signa	uure of New Regis	tered 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
	P	GUSTAVO ORTEGA	4612 SW 143 PL EAST
1) Change Add			MIAMI, FL 33175
Remove			
X 2) Change	V	YENSY SANTALLA	1113 SW 78 CT
Add			MIAMI, FL 33144
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Changa			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary),	icles, enter change(s) here: (Be specific)
	
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

SEPTEMBER 18 2019

The date of each amendment(s) adoption:	, if other than the
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, the document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amenda by the shareholders was/were sufficient for approval.	ment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following standard 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	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	eholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required. SEPTEMBER 18, 2019	ler
Signature	
(By a director, president or other officer – if directors or officers have not selected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
YENSY SANTALLA	
(Typed or printed name of person signing) PRESIDENT	
(Title of person signing)	