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TO: Amendment Section
Division of Corporations

. .

NAME OF CORPO	RATION: GADOREM, INC.		
DOCUMENT NUM	P15000075592		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	GISELLE MOSLEY		
		Name of Contact Person	
		Firm/ Company	
	9314 Forest Hill Blvd, Unit 9	3	
	· · ·	Address	
	Wellington, FL		
		City/ State and Zip Code	?
	gcsw@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Giselle Mosley		at (574-5558
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the 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)
An Div P.C	iling Address tendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

GADOREM, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P15000075592 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The Legacy Shirts, Corp. 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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 (Florida street address) N/A , Florida_ New Registered Office Address: (Citv) 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

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) N/A Change	N/A	N/A	N/A
Add			
Remove 2) Change	N/A	N/A	N/A
Add			
Remove 3) N/A Change	N/A	N/A	N/A
Add			
Remove 4) N/A Change	N/A	N/A	N/A
Add			
Remove 5) Change	N/A	N/A	N/A
Add			
Remove 6) N/A Change	N/A	N/A	N/A
Add			
Remove			

N/A	ional sheets, if necesse	<u>l Articles, enter cha</u> ary). (Be specific)				
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			ification, or cance	<u>llation of issued sha</u>	ires,	
If an amend	lment provides for a	n exchange, reclass				
provisions	for implementing the	e amendme <u>nt if no</u> t	t contained in the	amendment itself:		
provisions (if not a	Iment provides for an for implementing the applicable, indicate N	e amendme <u>nt if no</u> t	t contained in the	amendment itself:		
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The date of each an		N/A option:	, if other than the
late this document w	~		
Effective date if app	N/A olicable:		
		(no more than 90 da	vs after amendment file date)
		ock does not meet the applicable artment of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amend	lment(s)	(CHECK ONE)	
The amendment(s action was not rec	•	ted by the incorporators, or boar	d of directors without shareholder action and shareholder
		eted by the shareholders. The number of the ficient for approval.	mber of votes cast for the amendment(s)
			voting groups. The following statement separately on the amendment(s):
"The numbe	er of votes cast f	or the amendment(s) was/were su	ifficient for approval
by			
		(voting group)	
	01/28/202	3	
Da	ated		_
Si	gnature	Cyroly	
O.	(By a dir selected	•	if directors or officers have not been nds of a receiver, trustee, or other court
		Giselle Mostey	
	-	(Typed or printed nam	e of person signing)
		CEO	
	-	(Title of person signin	g)