P16000017599

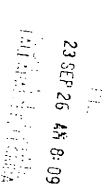
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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J. HORNE
OCT 1 1 2023
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: GTOPS INC.				
	MBER: P16000017599				
	es of Amendment and fee are so	ibmitted for filing.			
Please return all cor	respondence concerning this ma	atter to the following:			
	Gregory Billman				
	Name of Contact Person				
	GTOPS, INC.				
		Firm/ Company			
	690 Jackson Street	*			
		Address			
	Satellite Beach, Florida 3293	37			
		City/ State and Zip Cod	<u> </u>		
		,			
	greggbillman@gmail.com	sed for future annual report			
For further informat Ray Garcia, Esq.	ion concerning this matter, plea		227-4030		
Name of Contact Person		at (Area Co	de & Daytime Telephone Number		
Enclosed is a check	for 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 \$. Monroe Street, Suite 810		

Taliahassee, FL 32303

Articles of Amendment



	Articles of Incorporation
GTOPS, INC	of 9.29
(Name of Corpor	ration as currently filed with the Florida Dept. of State)
216000017599	
(Doc	cument Number of Corporation (if known)
tursuant to the provisions of section 607.1006. Flor s Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s)
t. If amending name, enter the new name of the	e corporation:
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp." "In "chartered." "professional association," or the ab	The new "corporation," "company," or "incorporated" or the abbreviation "Corp.," nc.," or "Co". A professional corporation name must contain the word obreviation "P.A."
3. Enter new principal office address, if applica Principal office address <u>MUST BE A STREET A</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)
 If amending the registered agent and/or registered agent and/or the new register 	stered office address in Florida, enter the name of the red office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(Florida street address) Florida

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.

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.

Add

Example:	13/15		
<u>X</u> Change	PT	<u>Iohn Doe</u>	
X Remove	$\frac{\mathbf{V}'}{\mathbf{V}'}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>S</u>	Kevin Ryan	50 Berkeley Street
Add			E269
X Remove			Satellite Beach, Florida 32937
2) Change	S	Dania Billman	690 Jackson Street
XAdd			Satellite Beach, Florida 32937
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			

Mtaeh additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
, , , , , , , , , , , , , , , , , , ,	
	
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If an amendment provides for an ex	change, reclassification, or cancellation of issued shares.
provisions for implementing the an	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ad	option:, i	if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado action was not required.	nted by the incorporators, or board of directors without shareholder action and shareholder action acti	reholder
☐ The amendment(s) was/were ado by the shareholders was/were su	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
must he separately provided for	roved by the shareholders through voting groups. The following statement rach voting group entitled to vote separately on the amendment(s):	
"The number of votes east i	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
selected appoint		
•	(Typed or printed name of person signing)	
	PRESIDENT/DIRECTOR /MAJORITY SHARFHOLDER	