P16000033268

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TO: Amendment Section

Division of Corporations

Nation of Contra	DRATION: gold coast van lines	s, inc	·
DOCUMENT NUM	IBER: P16000023268		
	es of Amendment and fee are sul	bmitted for filing.	
Please return all corr	respondence concerning this mal	tter to the following:	
	Genny Hughes		
		Name of Contact Pe	rson
	United Agent Services LLC		
		Firm/ Company	
	221 N Broad St	, .	
		Address	_
	Middletown DE 19709		
	City/ State and Zip Code		
	filings@unitadoguntes=zione		
	filings@unitedagentservices.c		
	E-mail address: (to be us	ed for future annual rep	gort notification)
For further informati	ion concerning this matter, pleas	se call:	
Ruthy Willard		at (<u>520</u>	S81-3989 Code & Daytime Telephone Number
Name	e of Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check	for the following amount made [payable to the Florida I	Department of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status
A) Di P.	ailing Address nendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	An Div Th	eet Address hendment Section vision of Corporations e Centre of Tallahassee 15 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

gold coast van lines, inc

2022 FEB 10 AM 9: 26

(Name of Corporation as currently filed with	the Florida Defit of State) : Y Or STATE
P16000023268	TALLAHASSEE, FL

	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	s Florida Profit Corporation	adopts the following amendment(
A. If amending name, enter the new na	me of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	orp," "Inc," or "Co".	A professional corporation	d" or the abbreviation "Corp"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
in the state of th	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent			name of the
	Al-Canid	treet address)	
	N/A	reci adaress)	
New Registered Office Address:		(City)	Florida (Zip Code)
			(r.qr v oue)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agen Pred agent. I am familiar	it: with and accept the obligat	ions of the position.
	Signature of New	Registered Agent, if changin	g
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)

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
1) Change	Đ	Carmen Perez	4752 NW 15 St
Add			Coconut Creek FL 33063
X Remove			
2) Change		N/A	N/A
Add			
Remove 3) Change	<u></u>	N/A	N/A
Add			
Remove			
4) Change		N/A 	N/A
Add			
Remove			
5) Change		N/A	N/A
Add			
Remove			
6) Change		<u>N/A</u>	N/A
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

•

	option:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without s	shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were sul	oted by the shareholders. The number of votes cast for the ficient for approval.	he amendment(s)
	roved by the shareholders through voting groups. The factor voting group entitled to vote separately on the ame	
"The number of votes east t	or the amendment(s) was/were sufficient for approval	
by		
···	(voting group)	
January 18, Dated	2(122	
Signature	Antonio Duval	
selected	ector, president or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
	Antonio Duval	
•	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	