P16000 035 638

(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phone i	<u>+n</u>
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PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Name	e)
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(Doc	ument Number)	
Certified Copies	Certificates of	of Status
		
Special Instructions to F	iling Officer:	
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AUG 1 5 2019 S. YOUNG TO AUG 12 AH TO OI SECRETARY OF STATE ALLAHASSEE FI ODINA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLOBAL BUSIN	ESS ADMINIST	RATION	CORP
	BER: P16000035638			
	of Amendment and fee are su	ibinitted for filing	ļ.	
Please return all corre	spondence concerning this ma	tter to the follow	ing:	
	RAUL SILVA			
		Name of Con	tact Persoi	n
	GLOBAL BUSINESS ADM	INISTRATION	CORP	
		Firm/ Co	mnany	
	C/O RAUL SILVA, 1920 RA			
		Addr	ess	
	IRVING, TX 75062-4830			
		City/ State an	d Zip Cod	e
cmar	tinez@gbacorp.us			
	E-mail address; (to be us	sed for future ann	ual report	notification)
For further informatio	n concerning this matter, pleas	se call:		
RAUL SILVA		at (786	de & Daytime Telephone Number
Name	of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Flo	orida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filin Certified Co (Additional c enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Div: P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GLOBAL BUSINESS ADMINISTRATION CORP

(Name o	of Corporation as currently	filed with the Florida De	pt. of State)	
P16000035638				
	(Document Number of C	Corporation (if known)	***	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation	adopts the following ame	ndment(s) to
A. If amending name, enter the new na	ime of the corporation:			
N/A			Tho	иеж
name must be distinguishable and con. "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	o". A professional corpo	porated" or the abbrevi	ation
B. Enter new principal office address,	if annlicable:	N/A		
(Principal office address MUST BE A S		 	· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applia (Mailing address MAY BE A POST) D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent	OFFICE BOX) d/or registered office addre	UTIONS INC	SECRETARY OF STATE	FILED ANS 12 M SE OI
	(Florida stree	t address)		
New Registered Office Address:	MIAMI, FL		Florida	
	(0	liņa.	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. Tam familiar wi	th and accept the obligation		

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	\underline{V}	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	MARTINEZ, REINA	2900 NE 7TH AVE UNIT 704
Add			MIAMI, FL 33137
X Remove			
2) Change	PD	SILVA, RAUL	1920 RAYBURN CT
XAdd			IRVING, TX 75062-4830
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Mach additional sheets, if he cessary)	rticles, enter change(s) here:).
N/A	

F. If an amendment provides for an ex-	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
Lither ambigable indicate M/A)	
(if not applicable, indicate N/A) N/A	
(if not applicable, indicate N/A) N/A	

The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	04/01/2019	
marchive date in appareasite.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date be Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	
JULY Dated Signature	31, 2019	
(B	y a director, president of other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed filluciary by that fiduciary)	
	REINA MARTINEZ	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	