## P16000042879

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10/13/20--01021--005 \*\*35.00



11/10/20

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	RPORATION: WORLD GOLD C	ORP ·		
DOCUMENT N	P16000042879			
The enclosed Art	icles of Amendment and fee are su	bmitted for filing.		
Please return all o	correspondence concerning this ma	tter to the following:		
	LUIS R. SMITH			
		Name of Contact Person		
	TAXES USA LLC			
		Firm/ Company		
	11402 NW 41ST STREET SUITE 211			
	Address			
	DORAL, FL 33178			
		City/ State and Zip Code		
	INFO@TAXESUSAMIAMI.COM			
	E-mail address: (to be us	sed for future annual report notification)		
For further inforr	nation concerning this matter, plea	se call:		
LUIS R SMIH		at () 470-2429		
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a che	ck for the following amount made	payable to the Florida Department of State:		
S35 Filing F	ee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee  Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee  Certified Copy (Additional Copy is enclosed)		
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

FILED

WORLD GOLD CORP	71 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(Name of Corporation	as currently filed with the Florida Dept. of State)
P16000042879	SECRETARY OF STATE
(Documer	nt Number of Corporation (if known) LLANASSEE. FL
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:
	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<del></del>
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
<u> </u>	<u>1100 1100 1100 1100 1100 1100 1100 110</u>
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I described the second of the second	tered Agent: am familiar with and accept the obligations of the position.
	, , , ,
Signatu	ire of New Registered Agent, if changing
•	and the state of t
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	PT Je	ohn Doe	
X Remove	<u>V</u> <u>N</u>	<u> Aike Jones</u>	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RAMON CARRASCO	11402 NW 41ST STREET
Add			SUITE 211-627
X Remove			DORAL, FL 33178
2) Change			· —————————
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
<del></del>	
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	endinent if not contained in the amendment visch.
<del> </del>	

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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after ame	endment file date)
Note: If the date inserted in this block does not meet the applicable statutory f document's effective date on the Department of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of director action was not required.	rs without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of vote by the shareholders was/were sufficient for approval.	es cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting gro must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	approval
by	
(voting group)	
09/25/2020 Dated	
(By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a recappointed fiduciary by that fiduciary)	
ROBERTO BALADO	
(Typed or printed name of person	signing)
PRESIDENT	
(Title of person signing)	