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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GSG MARKETIN	IG & CONSULTING, INC	· ·	
	BER: P16000052481			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	PRISCILLA GONZALEZ			
		Name of Contact Person	n	
	FIERCE CONSULTING			
		Firm/ Company		
	7735 NW 64TH ST BAY 7			
		Address		
	MIAMI FL 33166			
		City/ State and Zip Cod	c	
FIER	RCECONSULTINGMIAMI@	GMAIL.COM		
	-	sed for future annual report	notification)	
		·	,	
For further information	n concerning this matter, pleas	se call:		
PRISCILLA GONZALEZ		305	853-6475	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check to	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)	
Mailing Address			Address	
	endment Section ision of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GSG MARKETING & CONSULTING, INC.

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P16000052481	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" Corp., ""Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1464 SW 12TH AVE
(Principal office address MUST BE A STREET ADDRESS)	POMPANO BEACH, FL 33069
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address. Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
Signature of New 1	Registered Agent if changing

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP 	SAGHBINI, SANDRA	290 NW 6TH ST
Add			BOCA RATON, FL 33432
X Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	 		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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an amendment prov	vides for an exchange menting the amendm	e, reclassification,	or cancellation of	issued shares.	
if not applicable.		em ii not containe	u iii ine amenome	iit itsen;	
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The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file a	late)
Note: If the date inserted in this block does not meet the applicable statutory filing requiren document's effective date on the Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK QNE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following the separately provided for each voting group entitled to vote separately on the amend	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action ar action was not required.	nd shareholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and sh action was not required.	archolder
Dated 7 5 8 Signature Signature	
(By a director, president of other officer – indirectors or officers has selected, by an incorporator – if in the hands of a receiver, trustee.	
appointed fiduciary by that figuriary)	or other court
PRISCILLA GONZALEZ	
(Typed or printed name of person signing)	
CONSULTANT	
(Title of person signing)	