P16000052495

(Re	questor's Name)	
(Ad	dress)	
(* .2	,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
		
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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6/23/21

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLOBAL TEXTU	IRE, INC.		
	BER: P16000052495			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	JAMES H COLLIER SR			
		Name of Contact Person	1	
	COLLIER'S ACCOUNTING SERVICE, INC			
	Firm/ Company			
	8812 SHENANDOAH LAN	Е		
		Address	 _	
	HUDSON, F1, 34667			
		City/ State and Zip Code		
	JCOLLI58@YAHOO.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatic	on concerning this matter, pleas		\$48,6020	
	of Contact Person	at (727	868-6020	
	or the following amount made		de & Daytime Telephone Number	
■ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	endment Section ision of Corporations . Box 6327 ahassee, FI. 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

GLOBAL TEXTURE, INC.		
(Name of Corporation as current	ly filed with the Florida Dept. of S	ate)
P16000052495		
(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 t	he following amendment(s)
A. If amending name, enter the new name of the corporation:		

name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A professional corporation name n	The new abbreviation "Corp.," ust contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		CRETAR TALLAR
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PH 6: 45 RY OF STATE
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent		<u>he</u>
(Flavida etc	reet address)	
	eer aaaress)	
New Registered Office Address:	(City) , Flori	da(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v	<u>:</u>	,
		,_
Signature of New R	egistered Agent, if changing	
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)

Example:

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	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>	Address
1) Change	SEC	MELIZABETH JIMENEZ	9441 SUFFOLK LANE
X Add			Port Richey, FL 34668
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

atach additional si	ding additional Art heets, if necessary).	(Be specific)				
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<u>rovisions for imp</u>	provides for an exchalementing the ame ble, indicate N/A)	nange, reclassifica indment if not con	ation, or cancella ntained in the an	tion of issued sha nendment itself:	res,	
			-			
		·				
						
						

The date of each amendment date this document was signed	t(s) adoption:	if other than the
Effective date if applicable:	05/07/2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The following statement of 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)	
05/07/ Dated	2021	
(13 se	y a director, president or order officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	PEDRO FIGUEROA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	