P16000064786

(Re	questor's Name)	
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: GG ACCOUNTIN	G & TAXATION SERVI	CES CORP	
DOCUMENT NUM	IBER: P16000064786			
	s of Amenáment and tec are so			
Please return all core	espondence concerning this ma	ntter to the following:		
	GUILLERMINA GOMEZ			
		Name of Contact Perso	n	
	GG ACCOUNTING & TAX	TATION SERVICES CORI	p	
		Firm- Company		
	6625 MIAMI LAKES DR S	TE 455		
		Address		
	MIAMI LAKES, FL 33014			
		City/ State and Zip Cod	e ·	
	TAXESGIGI@OUTLOOK.	COM		
	-	sed for future annual report	actification	
For further information	on concerning this matter, plea	se call:at (540-4829	2022 7.00
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Dep	artment of State:	? 29
■ \$35 Filling Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	ATH: 32
An Div P.C	illing Address nendment Section ision of Corporations D. Box 6327 lahassec, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Ft. 32303		

Articles of Amendment to Articles of Incorporation of

(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)		
P16000064786				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7,1006, Florida Statutes, this	s Florida Profit Carporation adopts the followin	g nmendment(s) to	
A. If amending name, enter the new n	name of the corporation:			
N/A			14	
name must be distinguishable and contain "Inc.," or Co.," or the designation (chartered," "professional association,	$Corp_i$ "Inc." or ^+Co " $^-$	"company," or "incorporated" or the abbreviation A projessional corporation name must contain "	_the new on "Corp." n the word	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE 4 STREET ADDRESS</u>)		6625 MIAMI LAKES DR STE 455		
		MIAMI LAKES, FL 33014		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		6625 MIAMI LAKES DR STE 455		
		MIAMI LAKES, FL 33014		
			222270	
D. If amending the registered agent an	nd/or registered office add	lress in Florida, enter the name of the	 183 2	
new registered agent and/or the new registered office address			ف	
Name of New Registered Agent				
	6625 MIAMI LAKES DR		. 	
	(l'horida street addiress)		ယ က	
New Registered Office Address:	MIAMI LAKES 3304			
		iZip C	ode)	
New Registered Agent's Signature, if c	dianaina Registerad Agen			
I hereby accept the appointment as regis	tered agem – Lam familiar	<u>u.</u> with and accept the obligations of the position—		
	Signature of New F	Registered 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: I. Treasurer; S. Secretary, D. Director, TR. Trustee, C. Charman 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 Doc 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>P1</u>	John Doe	
X Remove	$\underline{\underline{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	GUILLERMINA GOMEZ	8300 NW 53RD ST
Add			STE 350 DORAL.FL 33166
X Remove			
2) Change	<u> </u>	GUILLERMINA GOMEZ	6625 MIAMI LAKES DR
XAdd			STE 455
Remove			MIAMI LAKES, FL 33014
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary)	(Be specific)
N/A	
···	
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	range, reclassification, or cancellation of issued shares,
(if not applicable, indicate N.4)	ndment if not contained in the amendment itself:
	\wedge
<u> </u>	<u> </u>
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08/01/2022
The date of each amendment(s) adoption:, if other than the
date this document was signed.
09/01/2022 Effective date if applicable:
ino more than 90 days after amendment file dater
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
If The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
If The amendment(s) was/were approved by the shareholders through voting groups. The tollowing statement must be separately provided for each voting group entitled to vote separately on the amendments).
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
Signature (By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Gullermina 60mo2 (Typed or printed name of person signing)
Owner / President