## P16000087841

(Requestor's Name)
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(Oity/State/Zip/: Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
<b>(</b>
(Document Number)
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GXYZ, INC.			
DOCUMENT NUM	P16000087841			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	KERWYN D SUTHERLAN	D		
		Name of Contact Person	1	
	GXYZ, INC.			
		Firm/ Company		
	12757 SW 49TH COURT			
		Address		
	MIRAMAR, FL 33027			
		City/ State and Zip Code	2	
For further informatic	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report se call:	notification)	
KERWYN D SUTHERLAND		at (	608-8442	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div	iling Address pendment Section rision of Corporations D. Box 6327	Amend Divisio	Address Iment Section on of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation of

JXYZ, IN	$\mathcal{N}_{\mathcal{C}}$ .	
	Corporation as currently filed with the Florida Dept.	of State)
60000	87841	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006. Florida Statutes, this <i>Florida Profit Corporation</i> add	opts the following amendme
A. If amending name, enter the new nam	ne of the corporation:	
		The new
	in the word "corporation," "company," or "incorpor ion "Corp," "Inc," or "Co". A professional corpora m," or the abbreviation "P.A."	
B. Enter new principal office address, if		
(Principal office address <u>MUST BE A STF</u>	REET ADDRESS )	
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OI</u>		
D. If amending the registered agent and/ new registered agent and/or the new	for registered office address in Florida, enter the nam registered office address:	e of the
Name of New Registered Agent		
=	(Florida street address)	Florida 72ip Code 75
New Registered Office Address:		Florida 53
	(City)	(Zip Code)
		ထ
New Registered Agent's Signature, if cha I hereby accept the appointment as register	anging Registered Agent: red agent.—I am familiar with and accept the obligations	of the position

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nam 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:

 $P = President; \ V = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director, \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Executive Officer; \ CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each held. President, Treasurer, Director would be PTD.$ 

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. To 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 Co-Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: 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	COO	JANICE O B	ANDHU	12757 SW 49TH COURT	
Add				MIRAMAR FL 33027	
x Remove					
2) X Change	P	KERWYN D	SUNTHERLAND	12757 SW 49TH COURT	
Add				MIRAMAR FL 33027	
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5/ Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach <i>additie</i>	or adding additional A onal sheets, if necessary	) (Be specific)	<del></del>		
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		<del>-</del> -			
				<del></del>	
	<del>-</del>				
lf an amendr	nent provides for an ev	change, reclassifica	ation, or cancella	t <u>ion of issued shar</u> c	*S <sub>4</sub>
	or implementing the aupplicable, indicate NeA)		ntained in the am	endment itself:	
	<del></del>				
			<del></del> -		
·					

The date of each amendment(s) a	doption:	if other th
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
•	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
☐ The amendment(s) was/were action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
JUNE 28	TH 2019	
Dated		
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	KERWYN D SUNTHERLAND	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	