P16 0000 98837

(Re	equestor's Name)	
(Ad	ldress)	
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(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: Golden Sandcastles, Inc
DOCUMENT NUMBER: P1600098837
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Ampalo Bergh Name of Contact Person Golden Send Castles Inc Firm/ Company 5913 Cedar Pure Dr. Address Orlando FL 32819 City/ State and Zip Code Carrybeigh @ 201. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Amparo Beigh at (407) 492-9378 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment

Articles of Incorporation of

to

Golden Sandras	stles, Inc
(Name of Corporatio	on as currently filed with the Florida Dept. of State) 11 23
P16000098837	
	ent Number of Corporation (if known)
(on various or suspendion (it known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the co-	rporation:
Callin Sal Ca	Too
GOINEN JANG CO	rporation," "company," or "incorporated" or the abbreviation "Corp.,"
"Inc.," or Co.," or the designation "Corp." "Inc.," or the abbrev	or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADD	
	
C. Enter new mailing address, if applicable:	1 21
(Mailing address MAY BE A POST OFFICE BOX	
	
D. If amending the registered agent and/or registered	ed office address in Florida, enter the name of the
new registered agent and/or the new registered o	ffice address:
Name of New Registered Agent	
The second section of the second seco	
	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:
1 nereny accept the appointment as registered agent. 1	am familiar with and accept the obligations of the position.
C:	ture of New Registered Agent, if changing
Signai	are of ivew registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

Example: X Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change				
Add			-	
Remove			_	
2) Change				
Add			_	
Remove 3) Change	_			
Add			_	
Remove			_	
4) Change				
Add			_	
Remove			-	
5) Change		_		
Add			_	
Remove			_	
6) Change			. <u>. </u>	
Add			_	
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
· · · · · · · · · · · · · · · · · · ·	
-	
f an umandment provides for an arch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	
	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: Immediately	
Effective date if applicable: Limber College (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and saction was not required.	hareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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``	
by" (voting group)	
Dated 12 23 2020	
Signature Demoter Reigh	
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)	
An paro Beign Typed or printed name of person signing)	
ryped of printed name of person signing)	
President	
(Title of person signing)	