

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170002516313)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146

Phone

: (305)444-4994

Fax Number

(305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

F 1	Address:			
- mari	TUULBEE.			

COR AMND/RESTATE/CORRECT OR O/D RESIGN GLOBAL GOODS SUPPLIES CORP.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

;~

FILED

17 SEP 25 AH 7: 47

Articles of Amendment to Articles of Incorporation of INTERPRETARY OF SHIPE

GLOBAL GOODS SUPPLIES CORP	
(Name of Corpor	ation as currently filed with the Florida Dept. of State)
P16000099729	•
(Doc	rument Number of Corporation (if known)
Pursuant to the provisions of acction 607,1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(9)
A. If amending name, enter the new name of the	corporation:
	The new
name must be distinguishable and contain the w "Corp" "Inc.," or Co.," or the designation "Co- word "chartered," "professional association," or to	vord "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the
B. Euter new principal office address, if applical (Principal office address MUST BE A STREET A	DDRESS)
C. Enter new mailing address, if applicables	
(Mailing address MAY BE A POST OFFICE I	<u> </u>
	•
D. If nurending the registered spent and/or registered agent and/or the new registered	tered office address in Florida, enter the name of the ed office address:
Name of New Registered Agent	
· ·	
	(Florida siteel address)
New Registered Office Address:	, F orld2
THE PROGRAMMENT OF THE PROGRAMME	(City) (Zip Cods)
New Registered Agent's Signature, if changing R	egistered Agent; I am familiar with and occupt the abligations of the position.
more and an approximation of a distance and addition of a addition	9 A
	anature of New Readstard Ament if changing
Cir.	anniure oi wew Keontwien Adeni II chandino

If amonding 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 afficer/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		
bbA X	\$Y	Sally Smith		
Type of Action (Check One)	Title	Name		<u>Addres</u> s
I) Change	VP	JIMMY D. GAMEZ C	OMEZ	15305 S W 297 STREET
X Add				HOMESTEAD FL 33033
Remove				
2) Change	<u> </u>			
Add				
Remove				
3) Chauge		<u> </u>		
Add				
Remove				
4) Change				
Add				
Remove		•		-
5)Change		·		
Add				
Remove				
رز) Change				
Add				
Remove				

If amending or adding additional Arti Attach additional sheels, if necessary).	(Be specifio)
· · · · · · · · · · · · · · · · · · ·	
·	
an amendment provides for an exchi	ange, reclassification, or cancallation of issued shares.
provisions for implementing the amore (if not applicable, indicate N/A)	name, reclassification, or cancellation of issued shares, admont if not contained in the amendment itself:
(V Not applicable, materie : 117)	
	

.

	06/23/2017	
The date of each amoudment(s)	ndoption:	, if other then the
date this document was signed.		
	S/23/2017	
Effective date if applicable:		a Cl. Juni
	(no more than 90 days after amendine	ent fue acte)
Note: If the date inscried in this document's effective date on the l	block does not meet the applicable statutory filing to Department of State's records.	requirements, this date will not be listed as the
Adaption of Amendment(s)	(CRECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast sufficient for approval.	for the amendment(s)
The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. To ach reting group entitled to vote separately on the	The following statement e omendment(s):
"The number of votes ca	st for the amendment(a) was/were sufficient for appro-	val
by		· ·
7.23	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder t	ection and shareholder
The amendment(a) was/were a notion was not required.	dopted by the incorporators without shareholder action	n sind shareholder
06/23/20	17	
Dated		
Signature	alie b/amin	
(By a	director, president or other officer of directors or of	ficers have not been
seleo	and, by an incorporator - if in the hands of a receiver,	trustee, or other court
	inted fiduciary by that fiduciary)	
	TALIA RAMIREZ	
	(Typed or printed name of person signing	8)
	PRESIDENT	
	(Title of person signing)	