P1760061335

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S TALLENT

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Award



COVER LETTER

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Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

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· · · ·

NAME OF CORPO	ORATION: Gotes Inc.		
DOCUMENT NUN	P17000013353		
The enclosed <i>Article</i>	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Jiri komara		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Person	1
	Gotes inc.		
		Firm/ Company	
	2010 taylor st #6b		
		Address	· · · · · · · · · · · · · · · · · · ·
	hollywood fl, 33020		
		City/ State and Zip Cod	e
licit	omara11@gmail.com		
		sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
JiriKomara		7543667980 at (5)
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ar Di P.(ailing Address mendment Section vision of Corporations O. Box 6327 Ilahassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building ixecutive Center Circle

Articles of Amendment to Articles of Incorporation of

Gotes, inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P17000013353

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

(Principal office address <u>MUST BE A STREET ADDRESS</u>)	200 - C
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	AR P E
(muting uturess <u>may be at 0st OFFICE BOX</u>)	

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Clin Card

, Florida

(Zip Code)

4,

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered 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, 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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s
1) Change		<u> </u>	
Add			
Remove			
2) Change	<u></u>		
Add			
Remove			<u></u>
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<u></u>
5) Change			
Add			
Remove			
•			
6) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

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The copany should be represented by two officers acting jointly. At least two officers must agree when making decisions.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/4)	
(y approvable,)	
· · · · · · · · · · · · · · · · · · ·	

•	•	۰.	•

7/25/2017

The date of each amendment(s) adoption: date this document was signed.

7/25/2017 Effective date if applicable:

(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 not be listed as the document's effective date on the Department of State's records.

(CHECK ONE) Adoption of Amendment(s)

□ 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 he 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 _____(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

> 7/25/2017 Dated

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)

Jiri komara

(Typed or printed name of person signing)

president

(Title of person signing)

_____, if other than the