P1700013353

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ZOIR AUG 30 PM 4:54 SECRETARY OF STATE

C. GOLDEN SEP - 4 2018

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ___ DOCUMENT NUMBER: p17000013353 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: jiri komara Name of Contact Person Gotes, inc Firm/ Company 100 fifth street, sui 1304 Address miami Beach, 33139 City/ State and Zip Code jirikomara11@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jiri Komara at (7543667986)

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 AUG 30 PM 4: 54

(Name of Corporation as currently filed with the Florida Dept. of State) ARY OF STATE ALL AHASSEE. FL

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

name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of	"Corp," "Inc," or "Co". A professi	or "incorporated" or the abbreviat onal corporation name must contain	io. th
B. Enter new principal office address, if appli			
(Principal office address MUST BE A STREET	(ADDRESS)		_
			-
	. _		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	TE BOX)		
		-	-
			-
			-
If amending the registered agent and/or re new registered agent and/or the new registered.		nter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	_
	(City)	(Zip Code)	

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: 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Oleksandr Yurchenko	tyrsova 768,Nucice ,25216
X Add			Czech republic
Remove			
2) Change			
Add			
Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change	-		
Add			
Remove			

	ets, if necessary).	(Be specific)				
						
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an amendment pro	ovides for an exc	hange, reclassific	ation, or cancell	ation of issued :	shares,	
rovisions for imple (if not applicable	ementing the ame	endment if not co	<u>intained in the ar</u>	nendment itself	<u>:</u>	
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	<u> </u>					
						

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ 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.	l
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	1 <i>t</i>
"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.	
Dated 08/27/2018 Signature Jini	
SignatureJin	
(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)	
VIRI KOMARA	
(Typed or printed name of person signing)	_
PEESIDENT	
(Title of person signing)	