P17000050504

(Re	equestor's Name)	_ .
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Golden Cardinal, INC			
DOCUMENT NUMBER: P17000050504			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Jimmy Herard		
	Golden Cardinal, INC	Name of Contact Person	1
	Golden Caldinal, 114C	Firm! Company	
	7316 NE 5th Avenue	Firm/ Company	
	 	Address	
	Miami, FL 33138		
		City/ State and Zip Code	3
info@	goldencardinal.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Jimmy Herard		786 at (616-5652
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

	Golden	Cardinal,	INC.
--	--------	-----------	------

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

ent(s) to

P17000050504		
(Doc	cument Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment
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 the	orp," "Inc," or "Co". A profession	or "incorporated" or the abbreviation
B. Enter new principal office address, if applical		
(Principal office address <u>MUST BE A STREET AI</u>	<u>ODRESS</u>)	
C. Enter new mailing address, if applicable:	nov.	•
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u> </u>	
		
D. If amending the registered agent and/or regist	tared office address in Florida, and	ter the name of the
new registered agent and/or the new registered		the name of the
Name of New Registered Agent		
nume of New Negamerea ngem		- · · · · · · · · · · · · · · · · · · ·
 	(Florida street address)	
N. P. C. JOSE ALL	,	
New Registered Office Address:	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Reliators I hereby accept the appointment as registered agent.	egistered Agent:	obligations of the position
i nereby accept the appointment as registered agent.	Tum jumitiar with and accept the	congainers of the position.
Sic	onature of New Registered Agent if	chanoino

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Lucia Baez	1165 Marseilles Dr. #33
Add X Remove			Miami Beach, FL 33141
2) Change			
Add · Remove			
3)Change			
Add Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
,	
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
A	
······································	

6/18/2017	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: 6/18/2017	
(no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the appli document's effective date on the Department of State's records.	cable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	e number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders thr must be separately provided for each voting group entitled to	
"The number of votes cast for the amendment(s) was/we	re sufficient for approval
by(voting group)	,,,
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors action was not required.	without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators with action was not required.	nout shareholder action and shareholder
6/18/2017	
Signature James	
	cer – if directors or officers have not been e hands of a receiver, trustee, or other court)
Jimmy Herard	
(Typed or printed	name of person signing)
Vresid	ent
(Title	of person signing)