P 1700061771

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COVER LETTER

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: GOLIDE 55 INC DOCUMENT NUMBER: P1700061771					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Laura Faueroa Name of Contact Person Golde 55, Inc. Firm/Company 400 N.W. 4th Ave # 223 Address Fort Lauderolale, F1 33311 City/ State and Zip Code business@goride 55. Lom E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Laura Figueria at 954, 242-7787 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:					
\$35 Filing Fee					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle					

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment	
to Articles of Incorporation	
, Articles of theorporation	בוו כס
Crolidess Inc	FILED
(Name of Corporation as currently filed with the Florida Dept. of State)	2017 AUG 29 - AM 11: 42
1/1/1000/6/17/1	
(Document Number of Corporation (if known)	TAPERANCESS RECEION
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following at its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation:	
Golidess. Inc.	ie new
name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbrecorp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must conword "chartered," "professional association," or the abbreviation "P.A."	eviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
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 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. N A	
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>PT</u> X Change John Doc NIA X Remove $\underline{\textbf{v}}$ Mike Jones <u>X</u> Add SVSally Smith Type of Action Title <u>Name</u> Address (Check One) 1) ____ Change ____ Add ___ Remove 2) ____ Change ___ Add __ Remove 3) ____ Change __ Add _ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change ____ Add Remove 6) ____ Change ____ Add ____ Remove

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amendment provide	s for an exchange, re-	classification, or ca	ncellation of issue	d shares,	
ovisions for implemen (if not applicable, inc	ting the amendment i	f not contained in t	i <u>he amendment it</u>	<u>seif:</u>	
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The date of each amendment(s) adoption:	_, if other than the
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 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 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"	
(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 8 24117	
Signature + M + V	
(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)	
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ullia havena	
(Typed or printed name of person signing)	
President	
(Title of person signing)	