P170000991412

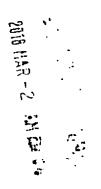
(Requ	estor's Name)	
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PICK-UP	☐ WAIT	MAIL
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2661 Executive Center Circle

Tallahassee, FL 32301

COVER LETTER

Division of Corp					
NAME OF CORPO	RATION: Good Move Corpo	oration			
DOCUMENT NUM	£17000000142				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	Eglis Mingle				
		Name of Contact Pe	erson		
	Firm/ Company				
	5965 Stirling Road #128				
	Davie, FL 33314	Address			
		City/ State and Zip (Code		
info@)goodmoveusa.com				
	E-mail address: (to be us	sed for future annual rep	port notification)		
For further informatio	n concerning this matter, pleas	se call:			
Eglis Mingle		at (802-7708		
Name	of Contact Person	Area	Code & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida D	Department of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certificate of Status		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building			

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

2010 HAR - 2 14 12 3.

Good Move Corporation

(Name of Corporation as current)	ly filed with the Florida Dept. of State)
P17000099142	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: Good Move USA Corporation	
	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "word "chartered," "professional association," or the abbreviation"	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	
Name of New Registered Agent	NIA
	
(Florida str.	eet 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 v	
	N H legistered Agent, if changing
Signature of New R	egistered 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			
Add	•		
Remove			
2) Change			N/A
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
·	
	NIA
n amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
ovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
n amendment provides for an exchovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
ovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
ovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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ovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
ovisions for implementing the ame	endment if not contained in the amendment itself:
ovisions for implementing the ame	endment if not contained in the amendment itself:

		N.	A	
The date of each amendment(s) date this document was signed.	adoption:	· · · · · · · · · · · · · · · · · · ·		, if other than the
•	0/2018			
<u>, p</u>	(no more than	90 days afte	r amendment	file date)
Note: If the date inserted in this document's effective date on the I		licable statut	ory filing req	uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☐ The amendment(s) was/were act by the shareholders was/were s	•	he number o	f votes cast for	r the amendment(s)
☐ The amendment(s) was/were approvided for must be separately provided for				
	t for the amendment(s) was/w		= =	
by	(voting group)	14	<u></u> -	79
	(voting group)			
☐ The amendment(s) was/were action was not required.	lopted by the board of directo	rs without sh	areholder acti	on and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators wi	ithout shareh	older action a	nd shareholder
2/20/201	8			
Dated	0			
Signature/	HOR WIT			
(By a	director, president or other of			
	ed, by an incorporator - if in		a receiver, tru	stee, or other court
appoi	nted fiduciary by that fiduciar	y)		
	Benjamin R Mingle			
	(Typed or printe	d name of pe	rson signing)	
	President			
	(Titl	e of person s	igning)	