P1700000005

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	ne)
	ocument Number)	
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Certified Copies	Certificates	s of Status
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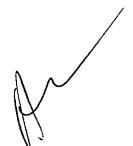


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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GROUP SCALE N	MARKETING, INC.		
DOCUMENT NUMBI	ER: P18000000675			
	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
,	ANTONIO ANGELBELLO			
_		Name of Contact Person	1	
(GROUP SCALE MARKETI	NG, INC.		
_		Firm/ Company	 _	
i	11535 SW 57 STREET	, Sempany		
_		Address	 	
ì	MIAMI, FL 33173			
-		City/ State and Zip Cod	e	
tonybe	llo9751@gmail.com			
	-	sed for future annual report	notification)	
	., 222, (10 00 00		,	
For further information	concerning this matter, pleas	se call:		
ANTONIO ANGELBI	ELLO	786 at (395-8047	
Name of Contact Person		at (786 395-8047 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations a Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

GROUP SCALE MARKETING, INC.

(Name of Corpora	ation as currently filed with the Florida Dept. of State) 6 P 2 it4
P18000000675	
(Doe	cument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the	ecorporation:
	The new
	word "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the the abbreviation "P.A."
B. Enter new principal office address, if applica	ble:
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE I</u>	<u></u>
D. If amending the registered agent and/or registered agent and/or the new registered	stered office address in Florida, enter the name of the red office address:
Name of New Registered Agent	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing F	
I hereby accept the appointment as registered agen	nt. I am familiar with and accept the obligations of the position.
Si	ignature 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	JOHN MANNY DE LA TORRE JR	2801 SW 79 CT
X Add			MIAMI, FL 33155
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	or adding additional Associated sheets, if necessary)				
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			<u></u>		
f an amend	ment provides for an ex	rchange reclassific	estion, or cancells	ation of issued sha	ires.
provisions	for implementing the ar	mendment if not co	ntained in the ar	nendment itself:	
(if not	applicable, indicate N/A)	<u> </u>	-		
	<u>. </u>				
		··			

	01/02/2018	
The date of each amendment(s	adoption:	, if other than the
late this document was signed.		
0 _ Effective date <u>if applicable</u> :	1/02/2018	
Effective date it applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
01/05/2 Dated Signature	018	
	a director, president or other officer – if directors or officers have not been	
	cted, by an incorporator - if in the hands of a receiver, trustee, or other court	
арр	ointed fiduciary by that fiduciary)	
	ANTONIO ANGELBELLO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	