P180000 43639

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COVER LETTER

TO: Amendment Section Division of Corporations

• . •

NAME OF CORPORA	TION: Holy Light Global	Inc	
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	Jacqueline M Rosado	o	
		Name of Contact Person	n
	Tax House Miami I	ne	
_		Firm/ Company	
	301 NE 79th Street	2	
_		Address	
	Miami FL 33138		
_	•-	City/ State and Zip Cod	e
	Jacqui@taxhousen	niami.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information of Jacqueline M Rosado	concerning this matter, pleas	se call: at (at (, 615-2009
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. B	ng Address Idment Section on of Corporations ox 6327 assee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

Holy Light Global Inc

(Name	of Corporation as currentl	<u>y filed with the Florid</u>	la Dept∴of State) ∪ □	ii 5: 50
P18000043639				
	(Document Number of	Corporation (if know	n)	_
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corpord	ation adopts the following	ng amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
Cornerstone Family Coverage Inc				The new
name must he distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,	Corp." "Inc." or "Co". A			on "Corp.,"
B. Enter new principal office address,	if applicable:			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
C. Enter new mailing address, if appl	icable:			
(Mailing address MAY BE A POST			<u> </u>	
			<u></u>	
		<u> </u>		· - ·
D. If amending the registered agent ar			the name of the	
new registered agent and/or the ne		<u> </u>		
Name of New Registered Agent	Tax House Miami Inc			
	301 NE 79th Street 2			
	(Florida str	eet address)		_
New Registered Office Address:	Miami		. Florida 33138	
		(City)		Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	in the second second	مان ورو	
I hereby accept the appointment as regis	tered agent Lam familiar v 	with any accept the obl	igations of the position.	
	/ / K			
	Signature of New R	egistyred Syent, if chai	nging	_

Check if applicable

 \Box The amendment(s) is/arc being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	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			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sh	ing additional Articles, neets, if necessary). (B	le specific)	_		
	=			 -	
		•			
	· · · ·				
	<u>.</u>				
					
<u> </u>					
f an amendment p	rovides for an exchang dementing the amendm	e, reclassification	, or cancellation of	of issued shares,	
(if not applicat	ole, indicate N/A)	tene ii not contain	ied in the amendi	ment itseir.	
	,				
					
				 	
					

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the an afficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling gives)	
February Dated Signature) SeS	
selecte	firector, prosident or other officer – if directors or officers have d, by an incorporator – if in the hands of a receiver, trustee, or ited fiduciary by that fiduciary)	
	Danny Gonzalez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	· · · -