

Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GIOFF M	letal Indust	ries, Inc.
DOCUMENT NUMB	er: <u>P180000</u>	40217	
The enclosed Articles (	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	ster to the following:	
-	Fo	Name of Contact Perso	<u> </u>
-	Forrest	Sygman P. Firm/Company	A .
-		Kendall Drve	
-	Miami, Floi	ACC 33150 City/ State and Zip Cod	e
	FOYYEST SYCE	A for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
TOWOS Name o	+ Sygman f Contact Person	at ( <u>305</u> Area Co	de & Daytime Telephone Number
inclosed is a check for	the following amount made		
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy
		enclosed)	(Additional Copy is enclosed)
Mailing Address		Street Address	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

#### Street Address

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

### Articles of Amendment to Articles of Incorporation of

# FILED 18 AUG -6 AM 94 28

SECA: IA: 4 1628 IAIE
(Name of Corporation as currently filed with the Florida Dept. of State) FLORIDA Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation; A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 (Florida street address) New Registered Office Address: 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, 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>X</u> Change	<u> PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	$\underline{SV}$	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) X Change	P	Forrest Sygman, P.A.	7300 N. Kendali DYNE.		
Add		,	SUIR 450		
Remove			Miami, Florida 33156		
2) Change	P	Manuel Branco	1907 8th Ave. North		
X Add			Lake worth, Florida 3346		
Remove					
3 ) Change		<del></del>			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add			<u></u>		
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	. (Be specific)
_	
<del></del>	
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the amo	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:  AUGUST 1 3018  (no more than 90 days after amendment file date)	
(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 dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ 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):	nı
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7/27/18	
Signature	
(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 tiduciary by that fiduciary)	
Manuel Branco (Typed or printed name of person signing)	-
President (Title of person signing)	