

P18 0000 86288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

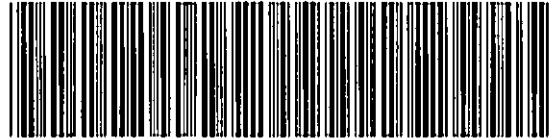
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2020

KARI CUEVA
GIG COLLECTIVE MARINE CORP
19149 SW 61 STREET
PEMBROKE PINES, FL 33332

SUBJECT: GIG COLLECTIVE MARINE CORP
Ref. Number: P18000086288

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You failed to make the correction(s) requested in our previous letter.

THE DOCUMENT YOU HAVE SUBMITTED IS SPECIFICALLY USED FOR FLORIDA PROFIT BENEFIT CORPORATIONS OR FLORIDA PROFIT SOCIAL PURPOSE CORPORATIONS ONLY. PLEASE RESUBMIT ON THE FORM PROVIDED ONLY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 420A00021956



Ⓢ Copy

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2020

KARI CUEVA
GIG COLLECTIVE MARINE CORP
19149 SW 61ST STREET
PEMBROKE PINES, FL 33332

SUBJECT: GIG COLLECTIVE MARINE CORP
Ref. Number: P18000086288

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE ARTICLES OF AMENDMENT TO CHANGE THE ENTITY NAME. THE FORM HAS BEEN PROVIDED.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 720A00019610

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GIG Collective Marine Corp

DOCUMENT NUMBER: P18000086288

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kari Cueva
Name of Contact Person
GIG Collective Marine Corp
Firm/ Company
19149 SW 61 Street
Address
Pembroke Pines, FL 33332
City/ State and Zip Code

kari.cueva@giginteriors.com
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

Kari Cueva at 305 588-3952
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:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|--|---|

Already sent previously and check was cashed

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

GIG Collective Marine Corp

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000086288

(Document Number of Corporation (if known))

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:

GIG Interiors, Inc.

The new

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)

19149 SW 61 Street

Pembroke Pines, FL 33332

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Same as above

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:

(City)

Florida

(Zip Code)

2025 NOV -1 AM 4:20

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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

(Attach additional sheets, if necessary)

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.

Example:

<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>
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 Remove _____

(Attach additional sheets, if necessary). (Be specific)

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(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

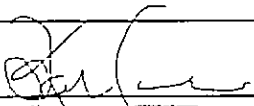
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ 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)

Dated 11/4/2020 _____

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 fiduciary by that fiduciary)

Kari Cueva

(Typed or printed name of person signing)

President

(Title of person signing)