da Departe ent of

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000064839 3)))



H250000648393ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CLAUDTA LIMA TAX & ACCOUNTING LLC

Account Number : I20230000193
Phone : (407)552-7903
Fax Number : (407)449-2348

••Ente	the	email	address	for	this	busin	ess	entity	to	be	used	for	futu	rέ
a	nnual	report	mailin	gs.	Enter	only	one	email	add	ress	s ple	ase.	**	- :

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN GB HOMESTEAD CORP

Certificate of Status	0
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A. R.: +130) 773

COVER LETTER

TO: Amendment Ser Division of Cor							
NAME OF CORPO	DRATION: GB HOMESTEAL	O CORP					
	1BER: P19000001638						
The enclosed Article	s of Amendment and fee are su	ibmitted for filing.					
Please return all corr	espondence concerning this ma	atter to the following:					
	CLAUDIA LIMA						
		Name of Contact Perso	n				
	CLAUDIA LIMA TAX & A	CCOUNTING LLC					
		Firm/ Company					
	9100 CONROY WINDERE	, ,	41				
		Address					
	WINDERMERE, FL 34786						
		City/ State and Zip Cod	e				
	INFO@CLAUDIALIMATA	X.COM					
	E-mail address: (to be used for future annual report notification)						
For further informati	on concerning this matter, plea	se call:					
CLAUDIA LIMA		at (407	dc & Daytime Telephone Number				
Namo	of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check f	for the following amount made	payable to the Florida Dep	artment of State:				
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
An Div P.C	nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					

FILED Articles of Amendment 2025 FEB 20 PM 12 03

Articles of Incorporation of

ĠВ	HOMEST	TAD	CORE

GB HOMESTEAD CORP	UI.		· 经加强工作等的是。
(Name	of Corporation as currently	y filed with the Florida	Dept. of State)
P19000001638			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporati	ion adopts the following amendment(s) to
A. If amending name, enter the new n.	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	${\it Corp}_i$ " ${\it 'Inc}_i$ " ${\it or}$ " ${\it Co}$ ". ${\it A}$	ompany," or "incorpord professional corporati	nted" or the abbreviation "Corp.," fon name must contain the word
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)	icable: OFFICE BOX)		
		•	
D. If amending the registered agent an new registered agent and/or the new	id/or registered office addr	ess in Florida, enter th	e name of the
	DANIEL CARVALHO DA		
Name of New Registered Agent	13400 SW 288 ST		
	(Florida stre	ret address)	
New Registered Office Address:	HOMESTEAD		, Florida 330033
Hen Regimered Office Address.	(City)		(Zip Code)
N 19	h		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar w	rith and accept the oblig	ations of the position.
_			
Auf C. 9	S Na Rego (Feb 15, 2015 14 48 F ST)		

Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are 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	<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>	Name	<u>Addres</u> s
1) Change	P	CLAUDIO BERGAMASCHI	13400 SW 288 ST
Add X Remove			HOMESTEAD, FL 33033
2) Change	P	DANIEL CARVALHO DA SILVA I	13400 SE 288 ST
X Add			HOMESTEAD, FL 33033
Remove Change			
Add			
Remove			
4) Change Add		_	
Remove			
5) Change		_	
Add			
Remove 6) Change			
Add			
Remove			

<u>If #mendin;</u> (Attach <i>addi</i>	g or adding additional Articles, enter change(s) here: tional sheets, if necessary). (Be specific)
LL NAME	OF THE PRESIDENT - LAST NAME: CARVALHO DA SILVA REGO. FIRST NAME: DANIEL
	
	
	<u> </u>
If an ameno	iment provides for an exchange, reclassification, or cancellation of issued shares,
provisions	for implementing the amendment if not contained in the amendment itself:
(if not	applicable, indicate N/A)
-	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:	(after amendment file date)
	(no more than 90 days	after amenament file date)
Note: If the date inserted in this document's effective date on the l		statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board	of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were		ber of votes cast for the amendment(s)
	pproved by the shareholders through vor each voting group entitled to vote s	oting groups. The following statement eparately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were suff	icient for approval
bv	(voting group)	<u> </u>
,	(voting group)	
	Y 18TH 2025	
Dated		
Signature Signature	1 (
selec	director, president or other officer – i ed, by an incorporator – if in the hand nted fiduciary by that fiduciary)	f directors or officers have not been Is of a receiver, trustee, or other court
	PAULO ROBERTO DE CASTRO	
	(Typed or printed name	of person signing)
	VICE PRESIDENT	
	(Title of person signing)	