P190000 17073

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GEO INNOVATE	ON SERVICES CORP	
DOCUMENT NUMI	BER: P19000017073		
	of Amendment and fee are st	abmitted for filing.	
Please return all corre	spondence concerning this ma	utter to the following:	
	MARTINEZ, YOANNY		
		Name of Contact Perso	on
	GEO INNOVATION SERV	ICES CORP	
		Firm/ Company	
	3785 SW 88TH CT	• -	
		Address	
	MIAMI, FL 33165		
	· · · · · · · ·	City/ State and Zip Coo	ie
CRIS	TINAVARELA03@GMAIL.	COM	
	J	sed for future annual repor	t notitication)
	is man address. (to be a	oca ioi iaime amiaan repor	
For further information	n concerning this matter, pleas	se call:	
MARTINEZ VA M	.tv.	205	214 1057
MARTINEZ, YOANNY		at (<u>305</u>	
Name of Contact Person		Area Co	ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	□\$43.75 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)
Ame Divi P.O.	ling Address Indiment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Ameno Divisio Cliftor	Address dment Section on of Corporations 1 Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GEO INNOVATION SERVICES CORP

(Name of Corporation as	currently filed with the Florida Dept, of State)
P19000017073	
(Document N	fumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stati its Articles of Incorporation:	ates, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	ation:
	The new proporation," "company," or "incorporated" or the abbreviation ac," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRES</u> :	(2)
	· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent	
(F	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:
hereby accept the appointment as registered agent. I am f	amiliar with and accept the obligations of the position.
Signature e	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 = Chie 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: \underline{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	VARELA. CRISTINA	3785 SW 88TH CT
X . Add			MIAMI, FL 33165
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change			
Add			
Remove			

. If amending or adding ac (Attach additional sheets, i	if necessary). (Be	specific)			
				-	· · ·
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		· · · · · · · · · · · · · · · · · · ·	 -		<u> </u>
		= .	***		
					
****			***************************************		
			<u>-</u>		
If an amendment provide	es for an exchange,	reclassification, o	r cancellation of is	sued shares,	
provisions for implement (if not applicable, ind	ting the amendmen	t if not contained	in the amendment	t itself:	
(9 101 4/7/11/11/11)	,				
		·			
· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	·
	· <u>-</u>	 			

	AUGÚST 26, 1029	
	(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, if other than th
date this document was signed	•	
	AUGUST 26, 2019	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
	this block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement and 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)	
action was not required. The amendment(s) was/wer	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated	08-26-19	
Signature		_
	y a director, president or other officer - if directors or officers have not been	
	lected, by an incorporator – if in the hands of a receiver, trustee, or other court	
ар	pointed fiduciary by that fiduciary)	
	MARTINEZ, YOANNY	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	