P19000021804

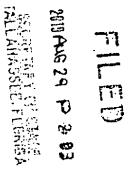
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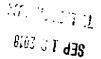
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: GOLDEN GIRLS	MIA CORP	
DOCUMENT NUMI	1.091.000001.0		
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	LUZ A. VARON		
		Name of Contact Person	n
		Firm/ Company	
	5512 NW 114th Ave. Apt #2		
	Doral, FL 33178	Address	
		City/ State and Zip Cod	e
borna	4samu@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
LUZ A. VARON		786 at (818-0800
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made [payable to the Florida Depa	rtment of State:
\$35 Fiting Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building secutive Center Circle ssec. FL 32301

Articles of Amendment to Articles of Incorporation of

GOLDEN GIRLS MIA CORP.

FILED

OOLDEN GIRLS WITA CORP		1 5 am t			
(Name	of Corporation as currer	ntly filed with the Florida Dept. of State)			
P19000021804		2811 Aug 29 P 2 03			
Pursuant to the provisions of section 607 as Articles of Incorporation:		of Corporation (if known) STATE WAY CONTROL INTO A WASSET, FLOWING A is Florida Profit Corporation adopts the following amendment			
3 Afficial of theorporation.					
A. If amending name, enter the new n	ame of the corporation:				
		The new			
	nation "Corp." "Inc." or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the			
Futur nav principal office address	if applicables	5512 NW 114th Ave			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Apt #210			
		Doral, FL 33178			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5512 NW 114th Ave			
		Apt #210			
		Doral, FL 33178			
D. If amending the registered agent ar new registered agent and/or the ne		dress in Florida, enter the name of the			
Name of New Registered Agent	LUZ A. VARON				
internet in the state of the st	5512 NW 114th Ave Ap	t #210			
	<u> </u>	treet address)			
Non-Bassistania I (1/25 a. 1. I.	Doral, FL	33178			
New Registered Office Address.		(City) (Zip Code)			
New Registered Office Address:		Florida33178			
New Registered Agent's Signature, if c	hanging Registered Agen	11.			
		with and accept the obligations of the position.			
	Signature of New	Revistered 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: 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	\$	ERIKA В. МЕЛА	8181 NW 36th ST
Add			Ste I
X Remove			Dorat. F1. 33166
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>additional sh</i>	ling additional Arti heets, if necessary).	(Be specific)				
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an amendment pr	ovides for an exch:	ange, reclassifica	ion, or cancellati	on of issued share	<u>8.</u>	
if not applicab	lementing the amen le, indicate N/A)	idment if not con	tained in the amei	idment itself:		
(3	, , , , , , , , , , , , , , , , , , , ,					
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	07/31/2019	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	7/21/2014	
Effective date <u>if applicable</u> :	7/31/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	nt(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes co	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareho	lder
07/31/20	10	
Dated	17	
Signature W	stadriana (drake	
(By a selec	director, president or other officer – if directors or officers have not bee ted, by an incorporator – if in the hands of a receiver, trustee, or other co inted fiduciary by that fiduciary)	
	LUZ A. VARON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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