

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.

(((H21000244663 3)))



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 : FASTKIT CORP

Account Number : I20100000009

Phone

: (305)599-0839

Fax Number

: (305)592-9591

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Ema11	Address:	( <u> </u>	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN THE CAVE MIAMI CORP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

MULY 2 3 2021

S. PRATHEF

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment to Articles of Incorporation of

THE CAVE MIAMI CORP		-	
	e of Corporation as curren	ntly filed with the Florida Dept. of State)	
P19000041936			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, onter the new	name of the corporation:		
GLOBAL INTERNATIONAL CUISIN	IE CORP		7
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association.	'Corp, " "Inc, " or "Co".	"company," or "incorporated" or the abbreviation of professional corporation name must contain "	_The new on "Corp.,"  n the word
B. Enter new principal office address (Principal office address MUST BE A.)	.if applicable: STREET ADDRESS )		<del></del>
			ALLIANA
C. Enter new mailing address, if app (Mailing address MAY BE A POST	licable:		開発を
(manny and the first that	VI (ICL BOX)		
			— မွာရွိ စု
D. If amending the registered agent as new registered agent and/or the ne	nd/or registered office add	fress in Florida, enter the name of the	;••
Name of New Registered Agent	DELFINA LOPEZ	ar	
CHANGE TO THE CONTRACT OF THE	1106 SW 8 TH ST		
	(Florida sii	reet address)	
New Registered Office Address:	MIAMI	, Florida 33130	
New Register Office Address.		(City) , Florida (Zip Ci	ode)
		•	·
New Registered Agent's Stenature, if e I bereby accept the appointment as regist	ered agent. I am familiae i	with and accept the obligations of the position.	
Check if applicable			
The amendment(s) is/are being filed prepared.	ursuant 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:

(Attack 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 Doc, PT us a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	SV	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	4		
Add			
Remove			
2) Change			-
Add			
Remove 3) Change			
Add			
Remove		·	
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Кенюче			

(Attu	tending or adding additional At the additional sheets, if accessury)	. (Be specific)			
				,, <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	
		·····			
			··		<u>-</u>
			·	<del></del>	<del></del>
		<del> </del>			
			<del>-,</del>		
				<del></del>	···
				·	
prov	amendment provides for an exc islops for implementing the am (if not applicable, indicase N/A)	hange, reclassifica endment if not con	ntion, or cancellati stained in the ame	on of issued shares adment itself:	
		<u></u>			
			-		<u> </u>

The date of each amendment(s) as	daption:	, if other than the
date this document was signed,		<del>_</del>
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory fiting requirements, this date will partment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(a) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
must be sepurately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	FILL 2021 JUN 22 KLLASASSE
"The number of votes case	for the amendment(s) was/were sufficient for approval	711 THE 22
by	(voting group)	
Dated		H 8: 17
selected	ector president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diductary by that fiduciary)	-
арроние	Dead Land Land	
-	(Typed or printed name of person signing)	<del></del>
	Tres. July.	
-	(Title of person signing)	<del> </del>