## P19000046087

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL	W23 —	1003001 **50.00
(Business Entity Name)  (Document Number)	NC & A	<b>y 1000,</b> 31003002 <b>++</b> 13.75
Certified Copies Certificates of Status	A. RAMSEY NOV -8:2023	2023 HOV -7 AM IT: 37
Office Use Only	NOV - , 2023	RECEIV 2023 MOV -6 P.H 36070 ATTUR TALLAHASSEE FI

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for films. Please return all correspondence concerning this matter to the following: CALIXTO VALLEJO Name of Contact Person NIN, LLC Firm Company 324 LAKE AVE NO 389 Address LAKE WORTH, FL 33460 City: State and Zip Code. ADMIN@GL2H64.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CALIXTO VALLEJO 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: 🔝 535 Filing Fee ■ \$43.75 Filing Fee & ...\$43.75 Filling Fee & LISS2.50 Filling Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee 2415 N. Monroe Street, State 810 Tallahassee, FL 32314

Tallahassee, FL 32303



November 7, 2023

CALIXTO VALLEJO XIN INC 824 LAKE AVE NO 389 LAKE WORTH, FL 33460

SUBJECT: XIN, INC

Ref. Number: P19000046087

We have received your document for XIN, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

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.

Letter Number: 023A00025871

Annette Ramsey OPS

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FILED

## Articles of Amendment to Articles of Incorporation of

2023 NOV -7 AM II: 37

(Name of Corporation as currently filed with the Florida Dept. of State NIN. Tree P19000046087  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  GL2H64 INC  name must be distinguishable and comain the word "corporation," "company," or "incorporated" or the above the corporation of Co.," or the designation "Corp.," "Inc.," or "Co", A professional corporation name must	following amendment(s) to
Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  GL2H64 INC  name must be distinguishable and comain the word "corporation," "company," or "incorporated" or the about the corporation of the corporation	The new
A. If amending name, enter the new name of the corporation: GE2H64 INC  mame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the about the corporation of the corporation of the corporation was a professional corporation was a must be designation."	The new
GL2H64 INC  name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abo "luc.," or "Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name mus	previation "Corn "
"bic.," or Co.," or the designation "Corp." "Inc." or "Co". A professional cornoration name mus	previation "Corp "
"chartered." "professional association," or the abbreviation "P.A."	contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	·
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	
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:	<del></del>
Name of New Registered Agent	
rFlorida street address	
New Registered Office Address:	(Zw Code)
ν ii, r	izip conei
New Registered Agent's Signatuve, if changing Registered Agent; I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the pe	ositiou.
Signature of New Registered Agent, if changing	<del></del>

Check if applicable

 $\perp$  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, (Enecessary)

Please note the officer director title by the first letter of the office title:

P = President; V = Fice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive 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 Doc 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 U and S. These should be noted as John Doc. PT as a Change. Mike Jones, Uas Remove, and Sally Smith, SUas on Add. Example:

X Change	<u>PT</u>	John Doe	
X Remove	7.	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	\$ANTIAGO AGUERO	821 LAKE AVE
			NO 389
Add X Remove			LAKE WORTH, FL 33460
2) Change			
Add			<del></del>
Remove 3.) Change			
Add			
Remove			
41 Change			
Add			
Remove			
51 Change			
Add			
Remove			
61 Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	Be specifics
•	
· · · · · · · · · · · · · · · · · · ·	
<u></u>	
. If an amendment provides for an exch	auge, reclassification, or cancellation of issued shares.
provisions for implementing the amer (if not applicable, indicate N.4)	udment if not contained in the amendment itself:
vii noi tippii tane, mineme N A1	
· · · <del></del>	

The date of each amendment(s) ado date this document was signed.	ption:, if other than r
Effective date if applicable:	
	tho more than 90 days after amendment file dates
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as a attended of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was were adopt by the shareholders was were suffil	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
The amendment(s) was were appro- ninst be separately provided for ea	ved by the shareholders through voting groups. The following statement with voting group entitled to vote separately on the amendments:
"The number of votes east fo	r the amendment(s) was were sufficient for approval
pi.	
	(Noting Stoffer
NOVEMBER	6TH, 2023
Dated	- · · <u>/                                </u>
,	144 16m
Signature	cibr. President or other officer – if directors or officers have not been
selected, )	ov an incorporator – if in the hands of a receiver, trustee, or other court
appointed	fiduciary by that fiduciary)
C.	ALIXTO VALLEJO
	(Typed or printed name of person signing)
QI	ALIFIER, DIRECTOR, SHAREHOLDER
	(Title of person signing)