## P19000076798

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORI	PORATION: Global Shock Tech	nnology, Corporation	···	
	MBER: P19000076798			
The enclosed A <i>rtic</i>	eles of Amendment and fee are su	sbmitted for filing.		
Please return all co	orrespondence concerning this ma	tter to the following:		
	Nancy Lopez			
		Name of Contact Persor	i	
	Global Shock Technology, C	orporation		
		Firm/ Company		
	421 NW 187 ave			
	<del></del>	Address		
	Pembroke Pines FL 33029			
		City/ State and Zip Code	2	
	Nancyl@global-Shock.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informa	ation concerning this matter, pleas	se call:	505-5338	
Nai	ne of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing 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)	
I !	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

Global Shock Technology, Corporation

Global Shock Technology, Corporation			F.C
\ <u></u>	of Corporation as currently	filed with the Florida Dept.	of State)
P19000076798			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	<i>Torida Profit Corporation</i> ad	opts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association."	Corp, " "Inc," or "Co". $A$	ompany," or "incorporated" ( professional corporation no	or the abbreviation "Corp.," une must contain the word
D. Enter now principal office address	if applicable:	1100 Brickel Bay Drive, #	45A Miami Florida 33131
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)		421 NW 187 ave. Pembrok	e Pines FL 33029
<li>If amending the registered agent an new registered agent and/or the new</li>			se of the
	Tegistered office and too.		
<u>Name of New Registered Agent</u>	1100 Brickel Bay Drive # 4	5 Δ	
	(Florida stre		
	Miami	et adaress)	33131
New Registered Office Address:		'Ciny)	Florida
	,	Cii,)	(ap come)
New Registered Agent's Signature, if c	hanging Registered Agent:		
I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligations	of the position. $pprox$
			2020 J
			; ; ;
	Signature of New Re	gistered Agent, if changing	American Services
Check if applicable			<b>A</b>
☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (	e), F.S.	<u> </u>
			70 :8 IIV
			<b>-</b>

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)

Example:

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.

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
		<del>-</del>	
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

f <mark>amending or addin</mark> Attach <i>additional shee</i>	ets, if necessary).	(Be specific)				
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f an amendment pro	vides for an excl	nange, reclassifi	cation, or cance	<u>llation of issue</u>	d shares,	
provisions for imple (if not applicable	menting the ame	endment if not o	ontained in the	amendment its	<u>elt:</u>	
(1) ты аррисате	z, maicale ivizi)					
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Tune 5, 2020  The date of each amendment(s) adoption:	, if other than the
date this document was signed.	, if other than the
June 5, 2020	
Effective date if applicable:	
(no more than 90 days after amendm	ent file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors wit action was not required.	hout shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes case by the shareholders was/were sufficient for approval.	st for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups.  must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for appro	oval
by Mithi Cof Copiet Jose Copiet	·"
June 10, 2020 Dated	
Signature 1/7 kg 1/2	
(By a director, president or other officer – if directors or of selected/by an incorporator – if in the hands of a receiver, appointed fiduciary by that fiduciary)	
Nancy Lopez	
(Typed or printed name of person signi	ng)
President	<u></u>
(Title of person signing)	