P200000 25414

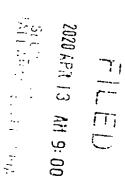
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



600342775866

04/13/20--01015--017 **35.00



Amend

APR 23 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: $\frac{G_{1}R}{2000}$	General Corp.	
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
	Name of Contact Person	
() & K	alneral corp.	
14434	SW 293 Terrace	
Homes	Stran, FL. 33033	
ain:	City/ State and Zip Code 7.0 10.3096 @ Yan 00 . CS	
1	be used for future annual report notification)	
For further information concerning this matter,	please call:	
Gonzalo Rodrigu	12 at (780) 550-8017	
Name of Contact Person J	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount m	nade payable to the Florida Department of State:	
\$35 Filing Fee		
Mailing Address Amendment Section	Street Address Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassec, FL 32303

Articles of Amendment

to Articles of Incorporation

GAR GENEVAL (REV.P.

V Zi I' U CITCI WI C U I I'	
(Name of Corporation as currently filed with the Florida Dept. of State) P2000025414	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amerits Articles of Incorporation:	ndment(s) t
A. If amending name, enter the new name of the corporation:	
The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "chartered," "professional association," or the abbreviation "P.A." 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) THE name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "UH3H SW 293" of "LAYA CO". TOWN OF THE ADDRESS STATES A POST OFFICE BOX) TOWN OF THE ADDRESS STATES A POST OFFICE BOX) TOWN OF THE ADDRESS STATES A POST OFFICE BOX)	new orp" word
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:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , Florida (Zip Code)	<u>-</u>
202 ATT	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of the position.	~ ,

Signature of New Registered Agent, if changing

Check if applicable

☐ 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, 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:	DT	Luba Da		
X Change	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
_				
Add				
Pamova				

Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
	<u> </u>
	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	·

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amen	dment file date)
Note: If the date inserted in this blocument's effective date on the De		ng requirements, this date will 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(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes fficient for approval.	cast for the amendment(s)
	roved by the shareholders through voting group each voting group entitled to vote separately or	
"The number of votes cast by	for the amendment(s) was/were sufficient for ap 110 RVAVIGACZ (voting group)	pproval
Dated_04/	09/2020	
selected	rector, president or other officer – if directors of d. by an incorporator – if in the hands of a received fiduciary by that fiduciary)	
	GUNZAIU RUC (Typed or printed name of person si	1riguez
	Officer/ Direct (Title of person kigning)	ctor/President