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Division of Corporations

P20000009545

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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To:
 Division of Corporations
 Fax Number : (850)617-6380

From:
 Account Name : PEREZ ARCHE AN ACCOUNTING & TAX SERVICES INC
 Account Number : I20070000033
 Phone : (305)649-7040
 Fax Number : (305)649-0477

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

Email Address: Araicaisabel@gmail.com

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SECRETARY OF STATE
TALLAHASSEE, FL

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
 GREEN TECH PAYMENT SOLUTIONS, INC.**

Certificate of Status	0
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Name Change

To:

Page: 2 of 9

2022-05-25 20:58:33 GMT

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From: Isabel Araica

850-617-6381

5/25/2022 11:00:00 AM PAGE 1/001 Fax Server

RE-FAX



May 25, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GREEN TECH PAYMENT SOLUTIONS, INC.
15676 S.W. 9TH LANE
MIAMI, FL 33194

SUBJECT: GREEN TECH PAYMENT SOLUTIONS, INC.
REF: P20000029545

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Diane Cushing
Senior Section Administrator

FAX Aud. #: E22000163685
Letter Number: 522A00011895

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: GREEN TECH PAYMENT SOLUTIONS INC

DOCUMENT NUMBER: P20000029545

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANA ISABEL ARAICA

Name of Contact Person

PEREZ ARCHE ACCOUNTING TAX SERVICES

Firm/ Company

4011 W FLAGLER ST STE 501

Address

CORAL GABLES, FL 33134

City/ State and Zip Code

ARAICAISABEL@GMAIL.COM

E-mail address: (to be used for future annual report notification)

2022 MAY 26 AM 11:28
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SECRETARY OF STATE

For further information concerning this matter, please call:

ALESIO VALDIVIA

Name of Contact Person

at (**305**) **244-6184**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

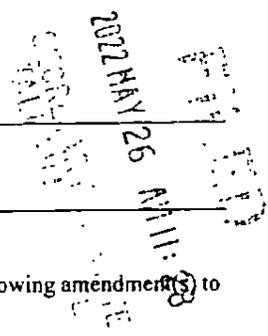
Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

(Name of Corporation as currently filed with the Florida Dept. of State)
P20000029545

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:



A. If amending name, enter the new name of the corporation:

GREEN TECH IMPORTS, INC

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "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**)*

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 _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am 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:

X Change PT John Doe
X Remove V Mike Jones
X Add SV Sally Smith

Table with 4 columns: Type of Action (Check One), Title, Name, Address. It contains 6 numbered rows for Change, Add, and Remove actions.

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

ARTICLE A: PLEASE CHANGE NAME

NEW NAME IS: GREEN TECH IMPORT INC

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 05/23/2022, if other than the date this document was signed.

Effective date if applicable: 05/23/2022
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

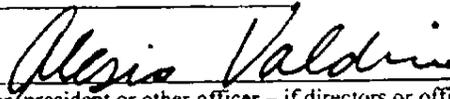
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

Dated 05/24/2022

Signature



(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ALESIO VALDIVIA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)