## P20 000041281

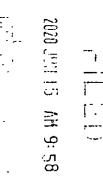
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORP	ORATION: GARZON SOCIAI	L SERVICES CORP					
NAME OF CORPORATION: GARZON SOCIAL SERVICES CORP  DOCUMENT NUMBER: P20000041281							
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.					
Please return all cor	respondence concerning this ma	tter to the following:					
	MILUSKA BERROCAL						
		Name of Contact Persor	1				
	2GB ACCOUNTING INC						
		Firm/ Company					
	15463 SW 86 TERRACE						
		Address					
	MIAMI FL 33193						
		City/ State and Zip Code	:				
	2GB.MBERROCAL@GMA	IL.COM					
	E-mail address: (to be us	sed for future annual report	notification)				
For further informa	tion concerning this matter, pleas	se call:					
MILUSKA BERRO	OCAL	at (	519-6768				
Nam	ne of Contact Person		de & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	ertment of State:				
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 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		Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810				

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

GARZON SOCIAL SERVICES CORP		_
(Name of Corporation as c	currently filed with the Florida Dept. of State)	
P20000041281		
(Document Ne	umber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following as	nendment(s) t
A. If amending name, enter the new name of the corporat	tion:	
	77	he new
name must be distinguishable and contain the word "corporat" "Inc.," or Co.," or the designation "Corp.," "Inc.," or "chartered," "professional association," or the abbreviation	Co". A professional corporation name must contain to	
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)		[1]
		ு <del>ம்</del>
	······································	<u>8</u>
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a		
Name of New Registered Agent		
tri	orida street address)	
New Registered Office Address:		-1
	(City) (Zip Cod	2)
New Registered Agent's Signature, if changing Registered	1 Avent:	
I hereby accept the appointment as registered agent. I am fa	imiliar with and accept the obligations of the position.	
	EN' Decision and America (Calculus in a	
Mgnature oj	f New Registered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.011	20 (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	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P <b>T</b>	MATEO G TARQUINO	14309 SW 96TH STREET	
Add			APT 506	
X Remove			MIAMI FL 33186	
2) Change	₽T	MATEO GARZON TARQUINO	14309 SW 96TH STREET	
X Add			APT 506	
Remove 3 ) Change			MIAMI FL 33186	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	sch additional sheets, if necessary). (Be specific)				
WRON	WRONG NAME OF PRESIDENT OF CORPORATION REGISTERED. CORRECT NAME SHOULD READ:				
FIRST	NAME: MATEO				
LAST	NAME: GARZON TARQUINO				
·					
	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself:				
μr	(if not applicable, indicate N/A)				

in the date of each amendment(s) ad-	06/10/2020 . if other than the
date this document was signed.	iption: it outer than the
06/01	/2020
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloddocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes east f	or the amendment(s) was/were sufficient for approval
by	<b></b>
•	(voting group)
06/11/2020 Dated	
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 didiciary by that fiduciary)
}	MATEO GARZON TARQUINO
-	(Typed or printed name of person signing)
I	PRESIDENT
_	(Title of person signing)