P20000074860

(Requestor	s Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GIRASOL GROU	P ENTERPRISES CORP	
DOCUMENT NUM			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	CARLOS A VARGAS SOC	ORRO	
	, 	Name of Contact Persor)
	GIRASOL GROUP ENTERI	PRISES CORP	
	<u> </u>	Firm/ Company	·
	3213 WHOOPING CRANE	• •	
		Address	_
	KISSIMMEE, FL 34741		
		City/ State and Zip Code	
	CARLOSVARGAS321@GN	JAIL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas S SOCORRO		674-7197
Name	of Contact Person) de & Daytime Telephone Number
Enclosed is a check for	or the following amount made		
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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment Articles of Incorporation of

GIRASOL GROUP ENTERPRISES CO	· · · · · · · · · · · · · · · · · · ·		<u> </u>
(<u>Name</u> P20000074860	of Corporation as current	ly filed with the Florida Dept. of S	<u>tate</u>)
1/20/00/074860	(Dogwood Number o	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:			he following amendment(s)
A. If amending name, enter the new n	ame of the corporation:		
			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contracted," "professional association,	Corp, " "Inc, " or "Co" 2	A professional corporation name n	abbreviation "Corp.,"
B. Enter new principal office address,	if applicable:	3213 WHOOPING GRANE RU	N
(Principal office address MUST BE A STREET ADDRESS)		KISSIMMEE, FL 34741	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST) D. If amending the registered agent at new registered agent and/or the new registered a	OFFICE BON) nd/or registered office add	<u>:</u>	7000 T
Name of New Registered Agent	3213 WHOOPING CRAN		
		eet address)	
New Registered Office Address:	KISSIMMEE	, Flori	ida
New Registered Agent's Signature, if c I hereby accept the appointment as regis	hanging Registered Agent tered agent. I am familiar s	<u>i</u> with and accept the offligations of th	· .
		egistered Agent, if changing	<u> </u>
Check if applicable The amendment(s) is/are being filed p	oursuant 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)

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 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 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.

<u>A</u> Change	171	John 170¢	
\underline{X} Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	PT	CARLOS A VARGAS SOCORRO	3213 WHOOPING CRANE RUN
Add			KISSIMMEE, FL 34741
Remove			
2) X Change	VP	LUCYHANA C PORTILLO PENA	1909 ISLAND CIR APT 103
Add			KISSIMMEE, FL 34741
Remove 3 1 Change	MGR	JOSE M SANCHEZ	2781 MONTICELLO WAY
Add			KISSIMMEE, FL 34741
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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nt pravidec for a	n svehanas r	urlaccification	ar cancellui	tion of icenad s	horac	
implementing th	ie amendment	if not contain	ned in the am	endment itself	:	
licable, indicate N	√.(4)				_	
				.		
						
						
						
	implementing th	ent provides for an exchange, re implementing the amendment dicable, indicate N/A)	implementing the amendment if not contain	implementing the amendment if not contained in the am	implementing the amendment if not contained in the amendment itself	ent provides for an exchange, reclassification, or cancellation of issued shares, implementing the amendment if not contained in the amendment itself: licable, indicate N/4)

•

The date of each amendment(s	s) adoption:	if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder action	areholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	cast for the amendment(s) was/were sufficient for approval	
by BOARD OF DIREC	CTORS	
бу	(voting group)	
sgle	d director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary) CARLOS A VARGAS SOCORRO (Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	