P21000006377

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R. VVETTE MAY 27 2021

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	ORATION: GSons Corp				
DOCUMENT NUM		·			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	atter to the following:			
	Ginsley Benjamin				
		Name of Contact Persor	1		
	Gsons Corp				
	·	Firm/ Company			
	5851 summerlake dr apt 111				
	Address				
	Davie, Fl. 33314				
	City/ State and Zip Code				
	Gsonscorp,benjamin@gmail	COM			
	E-mail address: (to be used for future annual report notification)				
	`	,	,		
For further informati	on concerning this matter, plea	se call:			
Ginsley Benjamin		954 at () 643-3113 de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depo	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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		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 2021 7 1 - 5 TM 12: 12

to

Cisons Corp	
(Name of Corporation as c p21000006377	currently filed with the Florida Dept. of State)
<u> </u>	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statut s Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendme
. If amending name, enter the new name of the corpora	ition:
i/a	The new
tame must be distinguishable and contain the word "corporat "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
Enter new principal office address, if applicable:	N/a
Principal office address <u>MUST BE A STREET ADDRESS</u>	i)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/a
(Maining address MAT DE ATOST OFFICE BOX)	-
. If amending the registered agent and/or registered off	ice address in Florida, enter the name of the
new registered agent and/or the new registered office a	address:
Name of New Registered Agent	
n/a 	
·	lorida street address)
New Registered Office Address: n/a	, Florida
	(Cny) (Zip Code)
ew Registered Agent's Signature, if changing Registered	1 Agent:
hereby accept the appointment as registered agent. I am fa	miliar with and accept the obligations of the position.
Signature of	f 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)

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PCFO	Ginsley Benjamin	5851 summerlake dr apt 111,
Add			Davie, Fl. 33314
Remove			
2) X Change	<u>v</u>	Kenold Joshua St.Dugue	6031 summerlake dr
Add			Davie, Fl.33314
Remove Change	CFO	kenol Duegee	
Add			
x Remove			
4) Change	D	Kevin Anothony Boucourt	2027 se 10th ave, unit 701
X Add			Fort lauderdale, Fl,33316
Remove			
5) Change	D	Rick Castro	2344 gatesboro Dr
dAdd			w saginaw, Michigan, 48603
Remove			
რ) Change			
Add			
Remove			

		
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an amendment pro	vides for an exchange, reclassification, or cancellation of issued shares,	
<u>provisions for imple</u>	menting the amendment if not contained in the amendment itself:	
f an amendment pro provisions for imple (if not applicable	menting the amendment if not contained in the amendment itself:	
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The date of each amendment(s) a	doption:	
date this document was signed.		
2/26 Effective date <u>if applicable</u> :	/2021	
ppiteasse.	(no more than 90 days after amendment file dat	(e)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the ar fficient for approval.	mendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendme	ing statement ent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
D 1		
Dated		
Signature Signature	En aux	
	rector, president or other officer - if directors or officers have	not been
selected	I, by an incorporator – if in the hands of a receiver, trustee, or	other court
appoint	ed fiduciary by that fiduciary)	
	Ginsied Benjamin (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	- -
	President incorporaror	
	(Title of person signing)	