Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000393103 3)))



H210003931033ABCW

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To:		
	Division of Co	rporations
	Fax Number	: (850)617-6380
From:		
	Account Name	: LENSUR CORP
	Account Number	: I20180000038
	Phone	: (305)364-8824
	Fax Number	: (305)364-8824
•Enter the	e email address	for this business entity to be used for fut
388113	l popost entlin	gs. Enter only one email address please.**

Email Address:_____

COR AMND/RESTATE/CORRECT OR O/D RESIGN GOOD MEAT CORP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Milliend

OCT 23 2021

ALBRITTON

TO: Amendment Section

COVER LETTER

Division of Corp	orations		
NAME OF CORPOR	RATION: GOOD MEAT CO	ORP	
DOCUMENT NUM			
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	
Please return all corres	spondence concerning this m	atter to the following:	
	ARINA SARGSIAN		
	PRESIDENT	Name of Contact Perso	n
		Firm/ Company	
	1840 W 49TH ST STE 706		
•		Address	
	HIALEAH, FL 33012		
·		City/ State and Zip Coo	le
	goodmeatcorp@outlook.com	•	
-		sed for future annual report	t notification)
For further information	concerning this matter, plea		,
ARINA SARGSIAN		at (⁷⁸⁶	3688178 de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State;
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divisi P.O. I	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussec, FL 32303

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

Articles of Amendment Articles of Incorporation of

GOOD MEAT CORP			
(Name P21000018280	of Corporation as curren	itly filed with the Florida Dept, of State)	
F21000018280			
		of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	'.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new n	ame of the corporation:		
ama must be dissipationable and			
"Inc.," or Co.," or the designation "t "chartered," "professional association,	Curp. "Inc." or "Co"	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word "	
B. Enter new principal office address, if applicable:		6187 NW 167TH ST	
Principal office address MUST BE AS	TREET ADDRESS)	STE H 4B	
		Miami, Fl 33015	
Enter new mailing address, if appl (Mailing address MAY BE A POST	icable: OFFICE BOX)	6187 NW 167TH ST	
		SUITE H 4B	
		MIAMI, FL 33015	
. If amending the registered agent an	id/or registered office add	reas in Florida, enter the name of the	
new registered agent and/or the nev	v registered office addres	<u></u>	
Name of New Registered Agent	ACHOT MENDELIAN		
	6187 NW 167TH ST STE	H 4B, MIAMI FL 33015	
	•	reet address)	
	6187 NW 167TH ST STE	H 4B, MIAMI Florida 33015	
New Registered Office Address:		, Florida	

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: XChange	PT	Iohn Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>\$v</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	ARINA SARGSIAN	18840 W 49TH ST
Add			SUITE 706
XX Remove			HIALEAH, FL 33012
2) Change	P	ACHOT MENDELIAN	6187 NW 167TH ST
XX Add			SUITE H 4B
Remove 3) Change			MIAMI, FL 33015
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Кеточе			
O Change		•	
Add			
Remove			

www.	g or adding additional itional sheets, if necessa	ry). (Be specific))		
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rovisions i	ment provides for an for implementing the applicable, indicate N/A	amendment if not	ication, or cancelle contained in the ar	ation of issued share: nendment itself:	<u>. </u>
· · · · · · · · · · · · · · · · · · ·					
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		*-			

	10/20/2021
The date of each amendment(s) adoption:, if other
late this document was signed.	
Now and the same of the	10/20/2021
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in the locument's effective date on the	is block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
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
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.
must be separately provided	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 c	ast for the amendment(s) was/were sufficient for approval
by	n
	(voting group)
DatedSignature(By select	ted, or an incorporator – if in the hands of a receiver trustee, or other court
abde	ARINA SARGSIAN
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)