# P21000022090

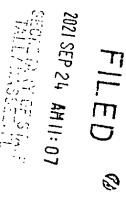
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# COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FOREVER GEN	SERAL SERVICES INC			
DOCUMENT NUMBI	ER: <u>P21000022090</u>				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
_		FERNANDO H CUNHA			
	Name of Contact Person				
_		Firm/ Company	<del></del>		
	4401 CORTINA CIR UNIT 341				
***	Address				
	FORT MYERS FL 33916				
_		City/ State and Zip Cod	<u> </u>		
_		NS.MULTISERVICESING			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, plea	se call:			
FERNANDO H DA		at (239			
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
□X \$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		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

### Articles of Amendment to Articles of Incorporation of

to

FOREVER GENERAL S		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P21000022090		
(Document Number of O	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fo</i> its Articles of Incorporation:	lorida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new name of the corporation:		
	<del></del>	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbrevio professional corporation name must con	ation "Corp.," stain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<u> </u>	7021 SE
	- · · · · · · · · · · · · · · · · · · ·	# P P P P P P P P P P P P P P P P P P P
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the	
new registered agent and/or the new registered office address:		)
Name of New Registered Agent	<del></del> -	";
(Florida stree	et address)	_
New Registered Office Address:	Florida	
		ip Code)
New Registered Agent's Signature if changing Registered Agent-		

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)

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)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	_У	GABRIEL EMANUEL DA CUNHA	4401 CORTINA CIR UNIT 341	
X Add			FORT MYERS FL 33916	
Remove				
2) Change				
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<del>_</del>		
Add				
Remove				
6) Change				
Add				
Remove				

•	<u>icles, enter change(s) here</u> : (Be specific)
<del>-</del>	
	<del> </del>
	<del></del>
<del></del>	
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
	<u> </u>
for an an and mark markets for an area.	and the state of t
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	The state of the s
<del></del>	

•

The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file o	late)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirer epartment of State's records.	ments, 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 sha	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the officient for approval.	amendment(s)
	proved by the shareholders through voting groups. The followed each voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
Dated	10 10 10 10 (100	
Signature ( -	Teenando Il Cuntor	
	rector, president or other officer - if directors or officers ha	
	d, by an incorporator – if in the hands of a receiver, trustee, led fiduciary by that fiduciary)	or other court
	PERMANENO IL DAL CUNIDA	
	(Typed or printed name of person signing)	
	(1) ped of printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	