P21000026685

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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J. FASON JUN 25 2021

COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: C-eneral Every day

DOCUMENT NUMBER: 72100026685 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sukhman Sandhy
Name of Contact Person Ceneal Everday, In c 55 Sw 97 St #2706
Address Mami, FL 33130 54khman 2288 & gmcul·com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sandhu at 916 849 - 2483

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to

Articles of Incorporation of

Generate El	very d	ay,	Inc	<u> </u>		
(Name of Corporation as currently fi	iled with the	Florida De	ot. of State)		
921000026	685					
(Document Number of Co		known)				
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	orida Profit Co	orporation	adopts the f	ollowing a	mendm	ent(s) to
A. If amending name, enter the new name of the corporation:				Tì	ie new	,
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."				reviation '	Corp.	•
B. Enter new principal office address, if applicable:	55	SW	9 m	St	# 2	2700
(Principal office address MUST BE A STREET ADDRESS)	M	ıami,	9 M FL	331	30	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	55 M10	Sw ami,	9Th FL	<i>St</i> 33	#2	706
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, e	enter the n	ame of the			
Name of New Registered Agent Name						
(Florida street	address)		<u></u>			
(1 tornus street	<i>baa</i> (76.35)					
New Registered Office Address: (Ci	<u>(</u> ψ.)		_, Florida_	(Zip Cod	e)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	n and accept to	he obligatio	ons of the po	sition.	2021 1/: V 10	
/4				<u>:</u> .	·. <:	
Signature of New Regi.	stared Acoust	ifehanaine		=	5	
	метен муст,	y vnanging		(11)	-	• .
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e),	F.S.			· 60 H : 08	.	نملت

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	Name	<u>Addres</u> s
1) Change		_ N [H	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		- ————————————————————————————————————	
Add			
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	sheets, if necessary).	(be specific)				
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f an amendment	provides for an exc	·hange, reclassifi	cation, or cance	llation of issued	shares.	
f an amendment provisions for in	provides for an exc nplementing the am	hange, reclassifi endment if not c	cation, or cance ontained in the	llation of issued amendment itsel	shares, f:	
f an amendment provisions for in (if not applic	nplementing the ameable.indicate N/A)	hange, reclassifi endment if not c	cation, or cance ontained in the	llation of issued amendment itsel	shares, f:	
f an amendment provisions for in (if not applic	nplementing the ameable.indicate N/A)	hange, reclassifi endment if not c	cation, or cance ontained in the	llation of issued amendment itsel	shares, f:	
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. . . .

The date of each amendment(s) adoptio	on: 5/6/21	, if other than the
date this document was signed. Effective date if applicable:	(no more than 90 days after amendment)	(ile date)
Note: If the date inserted in this block d document's effective date on the Departm	loes not meet the applicable statutory filing requent of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted baction was not required.	by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for approval.	r the amendment(s)
	by the shareholders through voting groups. The voting group entitled to vote separately on the an	
	e amendment(s) was/were sufficient for approval	202
by	(voting group)	2021 FAY 10
Dated	121	10 <u>₹</u>
selected, by a	president or other officer – if directors or office in incorporator – if in the hands of a receiver, trus- uciary by that fiduciary)	rs have not been
	Sythman Sanda (Typed or printed name of person signing)	
	(Title of person signing)	(60