5/25/2021

## Fivaria Department of State Division of Corporations Businous Filing Cover State

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H210002094743ABC

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : TAX ZONE INC.
Account Number : 120190000044
Phone : (407)888-3131
Fax Number : (888)453-0509

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: CICCOUNTANT@ taxzone FC. com

## COR AMND/RESTATE/CORRECT OR O/D RESIGN DGO GLOBAL SERVICES GROUP INC

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H210002694343

## COVER LETTER

TO: Amendment Se Division of Cor				
NAME OF CORPO	PRATION: DGO GLOBAL S	ERVICES GROUP INC		
	IBER; P21000047614			
The enclosed Article	s of Amendment and fee are st	ubmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	ED KOTLER			
		Name of Contact Person	n	
	TAX ZONE INC			
	-	Firm/ Company		
	8865 COMMODITY CIR. SI	JITE 4		
		Address	······································	
	ORLANDO, FL 32819			
		City/ State and Zip Cod-	e	
	ACCOUNTANT@TAXZON	NEFL.COM		
		sed for future annual report	notification)	
For further information	on concerning this matter, plea	sc call:		
ED KOTLER		at (	888-3131	
Name	Name of Contact Person Area Code & Daytime Telephone Num		de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
\$35 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)	
	lling Address		Address	
	endment Section	Amendment Section		
	rision of Corporations J. Box 6327		n of Corporations entre of Tallahassee	
	lahassec, FL 32314		I. Monroe Street, Suite 810	
	•		ssee, FL 32303	

H210002094743

## Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curren P21000047614	tly filed with the Florida Dept.	of State)	
P21000047614		·	
(Document Number	of Corperation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	s <i>Florida Profit Corporation</i> ado	pts the following amendmen	11(s) 10
A. If amending name, enter the new name of the corporation:			
GO GLOBAL SERVICES GROUP INC		The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation num	the abbreviation "Corp.,"	
B. Enter new principal office address. If applicable:	N/A		
Principal office address <u>MUST BE A STREET ADDRESS</u> )			202
			25 KAY 1203
	Name and the Control of Control o		
C. Enter new mailing address, if applicable:		E SE	S
(Mailing address MAY BE A POST OFFICE BOX)	N/A	[1]C:	P
		T07	بب
	· -		56
		<u> </u>	•
). If amending the registered agent and/or registered office add		of the	
new registered agent and/or the new registered office addres	<u>15:</u>		
Name of New Registered Agent			
(Florido si	reet address)	and the law of	
New Registered Office Address:	. F	'lorida	
The state of the s	(City)	(Zip Code)	
. B. Level Access St. Warnel and J. D. Level A.	_		
lew Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familiar	<u>t:</u> with and accept the obligations o	f the position,	
Charles CM 1	Danistana d daniel 20 ch au 20		
Signature of New N	Registered Agent, if changing		
The amendment(s) is are being filed pursuant to s. 607.0120 (11)			

Example:

4210002094743

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.

X Change	<u>PT</u>	John Doc	
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>	Address
I) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
.5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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sification, or ca t contained in	ancellation the amend	of issued shar ment itself:	es,	
		12/2 12 12 12 12 12 12 12 12 12 12 12 12 12	<del></del>	······
		<u>-</u>		
_	-			·

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
hy
(voling group)
05/25/2021 Dated
Signature Gina Orellanc
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
GINA ORELLANA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

EGRETÁRY OF STATE