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(Requestor's Name)			
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	- (1)	
(Oit	y/State/Zip/F110ft	= #)	
PICK-UP	☐ WAIT	MAIL	
	— •••••		
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
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04/29/2023

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COVER LETTER

TO: Amendment Section

Division of Corporations

<u>-</u>			
NAME OF CORPORATION:	Guif	Carts Ir	nc. 22000091983
DOCUMENT NUMBER:		Po Po	2 20000919 03
The enclosed Articles of Amend	iment and fee are sub	omitted for filing.	
Please return all correspondence	e concerning this mat	ter to the following:	
	Lar	1 Phan	
		Name of Contact P	Person
	_Gu	IF Cart	3,1nc
		Firm/ Company	
	711		piper Drive
	1 . 5	Address	20550
	VULTAL	nar Bed City/ State and Zip	Code FL JAS
	1 . 7		İ
		n5egn	
E-m	iail address: (to be us	ed for future annual re	eport notification)
For further information concern	ing this matter, pleas	e call:	
Lan Pha	rU.	70	3, 402-5932
Name of Contac		Are	23 Aug - 5932 Code & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made j		
``	43.75 Filing Fee & ertificate of Status	S43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certificate of Status
Mailing Add			treet Address
Amendment Section Division of Corporations			mendment Section vivision of Corporations
P.O. Box 632	.7	T	he Centre of Tallahassee
Taliahassee, I	FL 32314		415 N. Monroe Street, Suite 810 allahassee, FL 32303

Articles of Amendment

Articles of Incorporation of

	O1	
GUIF	CARTS	INC

G	IUIF CART	5 120	\mathcal{L}		
(<u>Name o</u>	f Corporation as currently	filed with the	e Florida Dep	t. of State)	
	7220000	9198	33		
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this A	lorida Profit (Corporation a	dopts the following	ng amendment(s) t
A. If amending name, enter the new na	me of the corporation:				
	N/A				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	orp," "Inc," or "Co". A	professional	corporation n	iame must conta	in the word
B. Enter new principal office address, i	f applicable:	714	Sand	dpiper	Drive
(Principal office address <u>MUST BE A ST</u>	<u>REET ADDRESS</u>)	Miran	nar	Beach,	FL
			3,	<u>2550</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		714	Sano	<u>dpiper</u> Bead	Drive
		Mi	ramar	Bead	23/F/L
			325	550	PR 2
D. If amending the registered agent and		ess in Florida.	enter the na	me of the	- (1)
new registered agent and/or the new	registered office address:				
Name of New Registered Agent	NA				- 00
	, (FI ·)				_
	, (Florida stre	et adaress)			
New Registered Office Address:		City)	· · · · · · · · · · · · · · · · · · ·	_, Florida	Code)
				1-2-7	J
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Agent:	ith and accent	the obligation	is of the nosition	
and the state of t		una uccepi	oongunon	o oj ine position.	
N/)	4				
	Signature of New Re	gistered Agent	, if changing	<u> </u>	_

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)

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: X_Change	PT John I	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones .	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	Richard Jones	<u> </u>
Add Remove		·	Miranus Beuch, FL 32550
2) Change	VP_	Ann Jones	2915 Pine Valley D
Add Remove Change Add			Milamas Beach FL 32550
Remove 4) Change Add	 .		
Remove 5) Change Add	···-		
Remove 6) Change Add Remove			

(,	ng or adding additional Articles, enter change(s) here: litional sheets, if necessary). (Be specific)	
N	. / A	
	/A	
		
_		
-		
-		
 _		
···		
	<u>. </u>	
<u>If an amen</u>	dement provides for an exchange, reclassification, or cancellation of issued shares,	
if not	s for implementing the amendment if not contained in the amendment itself: t applicable, indicate N/A)	
()	$\sim C/\Delta$	
	N/A	
		

The date of each amendme	ent(s) adoption: N/A	it other than the
date this document was sign	ed.	
Effective date if applicable	: W/A (no more than 90 days after amend	
	(no more than 90 days after amend	ment file date)
	n this block does not meet the applicable statutory filing the Department of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/v action was not required.	were adopted by the incorporators, or board of directors v	without shareholder action and shareholder
	were adopted by the shareholders. The number of votes of were sufficient for approval.	east for the amendment(s)
	vere approved by the shareholders through voting groups ided for each voting group entitled to vote separately on	
"The number of vo	tes east for the amendment(s) was/were sufficient for app	proval
by		· ·
	(voting group)	
Dated	4-16-2023 Thiba	
Signature	Lea Thiba	Q }
	(By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	er, trustee, or other court
	Lisa Thibau	it
	(Typed or printed name of person sig	ning)
•		
	(Title of person signing)	