## P230000 10844

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
J. HORNE	
MAR - 8 2024	
MAK - 0 2024	
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02/20/24--01015--019 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations

Division of Corporations

P.O. Box 6327

NAME OF CORPO	ORATION: GENESIS INTER	PRICE CORPORATION	
DOCUMENT NUM	TBER:		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	atter to the following:	
	Roy Matos		
		Name of Contact Person	1
		Firm/ Company	
	6955 NW 77th Ave Suite 408	<u> </u>	
	Miami, FL 33190	Address	
	<del>-</del> .	City/ State and Zip Cod	<del></del>
For furth <del>er</del> informati	E-mail address: (to be us on concerning this matter, pleas	sed for future annual report	notification)
ROY MATOS		at ( 305	742-9429
Namo	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$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)
	niling Address mendment Section		Address ment Section

Division of Corporations

The Centre of Tallahassee

	Articles of Amendment	· <u>-</u>	24
	to Articles of Incorporation	•	1
	of		
GENESIS INTERPRICE CORPORATION			- )
(Name of Corpo	oration as currently filed with the Florida Dept. of State	<del></del>	
P23000010844			•
(De	ocument Number of Corporation (if known)	<del></del>	26
Pursuant to the provisions of section 607.1006, Floris Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the	following am	iendment(s
A. If amending name, enter the new name of the	he corporation:		
GENESIS ENTERPRISE CORP		Th	e new
'chartered," "professional association," or the a		! contain the	e word
<ol> <li>Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u></li> </ol>			
C. Enter new mailing address, if applicable:	C DOV		
(Mailing address MAY BE A POST OFFICE			
	<del></del> -		
O. If amending the registered agent and/or reg	gistered office address in Florida, enter the name of the		
new registered agent and/or the new registe	ered office address:		
Name of New Registered Agent			
	(61-41-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-		
	(Florida street address)		
New Registered Office Address:	, Florida_		
	(City)	(Zip Code,	)
New Registered Agent's Signature, if changing			
hereby accept the appointment as registered age	ent. I am familiar with and accept the obligations of the pe	osition.	

Signature of New Registered Agent, if changing

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)

Remove

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 <u>PT</u> John Doe $\underline{X}$ Remove <u>v</u> Mike Jones X Add <u> SV</u> Sally Smith Type of Action Title **Address** Name (Check One) 1) \_\_\_\_ Change Add \_\_ Remove 2) \_\_\_\_ Change \_\_\_ Add Remove 3) Change \_\_ Add \_\_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add \_\_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 6) \_\_\_\_ Change \_\_\_\_ Add

. Landa Maniel Office Streets,	if necessary).	cles, enter change (Be specific)			
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				ion of issped share	<b>S.</b>
If an amendment provid	des for an exch	ange, reclassificate	<u>toined in the am</u>	andmont itself	
If an amendment provided provisions for implement (if not applicable, in	enting the ame	ange, reclassifica ndment if not con	tained in the am	endment itself:	
provisions for impleme	enting the ame	ange, reclassifica ndment if not con	tained in the am	endment itself:	
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If an amendment provid provisions for impleme (if not applicable, in	enting the ame	ange, reclassifica ndment if not con	tained in the ame	endment itself:	

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	01/01/2024	
The date of each amendment date this document was signed.		_, if other than the
Effective date if applicable:	02/13/2024	
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	e adopted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
02/13/ Dated Signature	RECA	
(B	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	_
	ROY MATOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	