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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GLOVAL DEBT I	PAYMENTS INC.			
	BER: P23000036951				
	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	DIEGO HAYMES				
		Name of Contact Person	1		
	GLOVAL DEBT PAYMENTS INC.				
	Firm/ Company				
	16141 SW 83RD AVE				
		Address			
	MIAMI, FL 32603				
		City/ State and Zip Cod	e		
	DIEGOHAYMES1998@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
DIEGO HAYMES		786 at (2198095		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status		
Am Div P.C	iling Address cendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

GLOVAL DEBT PAYMENTS INC.					
	ntly filed with the Florida Dept. of State)				
P23000036951					
(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment				
A. If amending name, enter the new name of the corporation:					
GLOBAL DEBT CONSULTANTS 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	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word				
B. Enter new principal office address, if applicable:	16141 SW 83RD AVE				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	PALMETTO BAY, FL 33157 C 5				
	E □				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	16141 SW 83RD AVE				
· · · · · · · · · · · · · · · · · · ·	PALMETTO BAY, FL 33157				
	mai d				
D. If amending the registered agent and/or registered office ad					
new registered agent and/or the new registered office addre	ess:				
Name of New Registered Agent					
(Florida :	street address)				
New Registered Office Address:	, Florida				
	(City) (Zip Code)				
New Registered Agent's Signature, if changing Registered Agen	nt·				
hereby accept the appointment as registered agent. I am familia	r 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)

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 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
1) Change	MGR	RODOLFO ZAPATA RAYA	11330 N.W. 36TH TERRACE
Add			MIAMI, FL 33178
X Remove			
2) Change	MGR	SANTIAGO GARZA BORDE	11330 N.W. 36TH TERRACE
Add			MIAMI, FL 33178
X Remove 3) Change	MGR	STEPHANIE LEYBON MEDINA	11330 N.W. 36TH TERRACE
Add			MIAMI, FL 33178
X Remove			
4) Change	MGR	Francisco Taboada Gargollo	11330 N.W. 36TH TERRACE
Add			MIAMI, FL 33178
X Remove			
5) Change	MGR	Raymundo Cruz Julian	11330 N.W. 36TH TERRACE
Add			MIAMI, FL 33178
X Remove			
6) Change			
Add			
Remove			

	mending or adding additional Article ach additional sheets, if necessary). (le specific)			
					
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6		l:6:			
11 211	n amendment provides for an exchangovisions for implementing the amendi	e, reclassification	ned in the amen	<u>r or issued snares</u> dment itself:	1
pro	(if not applicable, indicate N/A)		·· ·		
pro					
pro					
pro					
pro	· · · · · · · · · · · · · · · · · · ·				
pro					

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The date of each amendment(s	adoption:	, if other than the
date this document was signed.	7/24/2023	
Effective date if applicable:	()	
	(no more than 90 days after amendment file a	(ate)
Note: If the date inserted in thi document's effective date on the	block does not meet the applicable statutory filing requirent Department of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sha	reholder action and shareholder
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes cast for the sufficient for approval.	amendment(s)
	approved by the shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	··	
	(voting group)	
Dated	director, president or other officer – if directors or officers ha	ave not been
selec	ted, by an incorporator – if in the hands of a receiver, trustee, inted fiduciary by that fiduciary)	
	DIEGO HAYMES	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	

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