P23000040366

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GT ENTERPRISE	S OF FLORIDA INC				
DOCUMENT NUM	BER: P23000040366					
	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	TIMOTHY BICKEL					
		Name of Contact Persor	<u> </u>			
	GT ENTERPRISES OF FLORIDA INC					
	Firm/ Company					
	926 VALENCIA RD					
	-	Address				
	SOUTH DAYTONA, FL 32119					
		City/ State and Zip Code	e			
	JENNBICKEL4@GMAIL.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas		466-2423			
Name 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:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address		Street Address				
	rendment Section rision of Corporations	Amendment Section Division of Corporations				
). Box 6327	The Centre of Tallahassee				
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810				

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(<u>Name of</u>	Corporation as curren	tly filed with the Flor	ida Dept. of State)		
3000040366					
	(Document Number	of Corporation (if kno-	wn)		
rsuant to the provisions of section 607.10 Articles of Incorporation:	006, Florida Statutes. thi	s Florida Profit Corpo	ration adopts the fo	ollowing amend	lment(
If amending name, enter the new nam	ne of the corporation:				
/				The +	ien.
me must be distinguishable and contain th nc.," or Co.," or the designation "Cor hartered," "professional association," o	rp, " "Inc, " or "Co".	A professional corpo	oorated" or the abboration name must	reviation "Corp contain the w	ord
Enter new principal office address, if rincipal office address MUST BE A STR		NA	· · · · · · · · · · · · · · · · · · ·		_
Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ible: FFICE BOX)	NA			_
					_
If amending the registered agent and/			r the name of the		
new registered agent and/or the new i	registered office addres	<u>ss:</u>			-
Name of New Registered Agent	NA		<u> </u>		2 1
_					•
	(Florida s	treet address)			•
New Registered Office Address:	NT		, Florida		
		(City)		(Zio Code)	

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)

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	MATTHEW MELTON	5400 S WILLIAMSON BLVD
Add			APT 7305
XRemove			PORT ORANGE, FL 32128
2) Change	T	JENNIFER BICKEL	926 VALENCIA RD
X Add	<u> </u>		SOUTH DAYTONA, FL 32119
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			<u> </u>
5) Change			·
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)				
V A					
					_
		<u> </u>			
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37 77 3					
f an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	nge, reclassification dment if not conta	on, or cancellation ined in the amend	of issued shares, ment itself:		.F
14					- .
					_
		_	·		_
	<u>-</u> .				_
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. . .

The date of each amendment(s) adoption:date this document was signed.	12/24/2023	, if other than the
The state of the s	than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco		date will not be listed as the
Adoption of Amendment(s) (CHECK ONE	<u>E</u>)	
The amendment(s) was/were adopted by the incorporate action was not required.	ors, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendmen	nt(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entit		ment
"The number of votes cast for the amendment(s) v	was/were sufficient for approval	
by (voting group)	·*	
Dated /2/26/2C	<u> </u>	
(By director, president or other	ter officer – if directors or officers have not been if in the hands of a receiver, trustee, or other colluciary)	
(Typed or p	orty Sickel printed name of person signing)	1
	rson signing)	