P93000009936

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nai	me)
(Do	ocument Number))
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COVER LETTER

Walley Don organization

TO: Amendment Section Division of Corporations

NAME O	F CORPOR	ATION: GOLD~N~STUF	3			
	ENT NUME	D02000000026				
The enclos	sed Articles	of Amendment and fee are su	ibmitted for filing.			
Please retu	ırn all corres	pondence concerning this ma	atter to the following:			
		JOHN PAUL				
	•	Name of Contact Person				
	GOLD~N~STUFF					
	-		Firm/ Company			
	7621 PINES BOULEVARD					
	Address					
		PEMBROKE PINES, FL 33	024			
	•		City/ State and Zip Co	de		
	cap12	59@juno.com		_/		
		E-mail address: (to be us	sed for future annual repor	t notification)		
For further		concerning this matter, pleas		319-7754		
	Name o	f Contact Person	at (Area C	ode & Daytime Telephone Number		
Enclosed is		the following amount made		·		
■ \$35 Fi	ling 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

Articles of Amendment ·· to Articles of Incorporation of

GOLD~N~STUFF, INC.	- f C	62. J 241. 41 Plant 1	<u></u>		
P93000009936	of Corporation as currenti	y filed with the Florida Dept. of Sta	<u>te</u>)		
	(Document Number of	Corporation (if known)	•		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the	e following am	endme	ent(s) to
A. If amending name, enter the new n	ame of the corporation:				
			The	печ	,
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design	nation "Corp," "Inc," or "	Co". A professional corporation na	or the abbre me must conto	viatior ain the	•
word "chartered," "professional association," or the abbreviation "P.		P.A. "	全部	17	
B. Enter new principal office address,		<u></u>	<u> </u>	****	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		돐퓠	=	78
				8	F
			<u> </u>		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		7621 PINES BOULEVARD		ţ.	
		Pembroke Pines, FL 33024	Þ		
D. If amending the registered agent an new registered agent and/or the new			<u> </u>	<u></u>	
	JOHN PAUL				
Name of New Registered Agent					
	7621 PINES BOULEVARI				
	(Florida stre PEMBROKE PINES	et address)	22024		
New Registered Office Address:		, Florida			
	(City)	(Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of the p	osition.		
	John Pa	aul			

(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.

<u>PT</u>	John Doe	
<u>v</u>	Mike Jones	
<u>sv</u>	Sally Smith	
<u>Title</u>	<u>Name</u>	<u>Addres</u> s
PD	RUSSELL CHAMBERLAIN	1401 SW 68th Blvd
		PEMBROKE PINES, FL 33023
P	JOHN PAUL	7621 PINES BOULEVARD
		Pembroke Pines, FL 33024
ST	CHERYL PAUL	7621 PINES BOULEVARD
		Pembroke Pines, FL 33024

	V SV Title PD	V Mike Jones SV Sally Smith Title Name PD RUSSELL CHAMBERLAIN P JOHN PAUL

Control of the contro
E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)
Market Control of the
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
,
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The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date vartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopty the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s)	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
☐ The amendment(s) was/were adoption was not required.	sted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	sted by the incorporators without shareholder action and shareholder	
. 05/01/2016		
DatedSignature	John Paul	
(By a din selected	ef or, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
	OHN PAUL	
-	(Typed or printed name of person signing)	
1	PRESIDENT	
-	(Title of person signing)	