P95000034237

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Sec Division of Corp	porations		· · ·		
NAME OF CORPO	RATION: gav-yam developm	ent, inc	•		
DOCUMENT NUM	P95000034237				
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	·		
Please return all corre	espondence concerning this mat	ter to the following:			
	shlomo siama				
		Name of Contact Person			
	gav-yam development, inc				
		Firm/ Company			
•	500 bayview dr #430				
		Address			
	sunny isles beach, fl 33160				
		City/ State and Zip Code	.		
shlor	mo5252@hotmail.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
uhluma aiama		786 202000			
shlomo siama		at (
Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment 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)		
Ma	niling Address	Street	Address		
Amendment Section		Amendment Section			
	vision of Corporations		n of Corporations		
	D. Box 6327	Clifton Building			
Tal	llahassee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

gav-yam development, inc		
	n as currently filed with the Florida Dept. of State)	
P95000034237		
(Docume)	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amount	endment(s) to
A. If amending name, enter the new name of the corp	rporation:	
	The	new
	l "corporation." "company," or "incorporated" or the abbrev " "Inc," or "Co". A professional corporation name must conta	viation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>		
	<u></u> 	
		G 57 £-7#.
C. Enter new mailing address, if applicable:	#C	10 THE
(Mailing address MAY BE A POST OFFICE BOX)		9
		1 (Same
	Table 1) (
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		
Name of New Registered Agent		
- Auto-Office Register Carriages		
	(Florida street address)	
New Registered Office Address:	. Florida	
Hen Registered Office Address.	(City) , Florida_ (Zip Code)	
N. B. J. J. J. J. S. J. J. J. S. J. J. J. S. J. J. J. S. J.		
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I described the second of the second	stered Agent: am familiar with and accept the obligations of the position.	
. , , , , ,	, 3 ,	
	CN D : A C !	
Signati	ture 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)

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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
I) X Change	νp	sharon katz	500 bayview drive, sunny isles beac
Add			
Remove			
2) X Change	<u>s</u>	sherry siama	500 bayview drive, sunny isles beac
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	al sheets, if necessary).	(Be specific)		•	
					
	4-18-1 ·		tana		
					2 1, 2 1, 1
an amendmei	it provides for an excha	nge. reclassificat	ion, or cancellatio	on of issued shares.	
rovisions for	mplementing the ameno icable, indicate N/A)	lment if not cont	ained in the amer	dment itself:	
··· • •					
	·				

	September 14, 2016	
The date of each amendment date this document was signed.	s) adoption:	, if other than the
T. 40	September 14, 2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendre sufficient for approval.	nent(s)
	e approved by the shareholders through voting groups. The following st 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)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and share	holder
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and sharehold	er
Septen Dated	nber 14, 2016	
Signature		
	a director, president or other officer – if directors or officers have not	
	ected, by an incorporator – if in the hands of a receiver, trustee, or other pointed fiduciary by that fiduciary)	court
·	shlomo siama	
	(Typed or printed name of person signing)	
	president	
	(Title of person signing)	