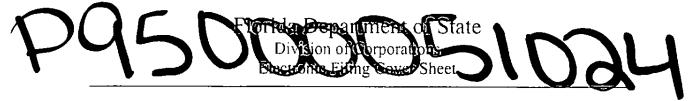
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000391034 3)))



H240003910343ABC-

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MONAHAN-MIJARES CPA, Inc

Account Number : I20050000157 Phone : (305)407-1438 Fax Number : (305)397-1003

**Enter the email address for this business entity to be used for future

annual	report	${\it mailings.}$	Enter	only	one	email	address	please.	**
Email	Address	:							

COR AMND/RESTATE/CORRECT OR O/D RESIGN GAMMA CHEMICAL, CORP.

Certificate of Status	0
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Help

R. Le feauers

COVER LETTER

TO: Amendment Se Division of Cor					
NAME OF CORPO	ORATION: GAMMA CHEMI	CAL, CORP.			
	1BER:				
	s of Amendment and fee are su				
Please return all corr	espondence concerning this ma	tter to the following:			
	ROARK R MONAHAN				
	Name of Contact Person				
	MONAHAN-MIJARES CPA		•		
		Firm/ Company			
	75 VALENCIA AVE, SUITI	E 703			
	Address				
	CORAL GABLES, FL 33134	4			
		City/ State and Zip Code	;		
	clismor.castillo@monahanm	ijares.com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
ROARK R MONAF	IAN	at (305	407-1440		
Name	e of Contact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check to	for the following amount made	payable to the Florida Depa	irtment of State:		
S35 Filing Fee	S43.75 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			
	nendment Section	Amendment Section			
	vision of Corporations D. Box 6327	Division of Corporations The Centre of Tallahassee			
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	filed with the Florida Dept. of State)
P95000051024	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	The new ompany, "or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida Cival	n address)
New Registered Office Address:	Florida Copp Copp (5)
New Registered Office Address:	(ip) (C(p) C(p) C(p) (5

Check if applicable

 \square 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	$\underline{\mathbf{V}}$	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	D	JEAN F DORIA	75 VALENCIA AVE, SUITE 703
X Add			CORAL GABLES, FL 33134
Remove			
2) Change			
Remove 3)Change			· ·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		-	
Remove			

	(Be specific)
<u> </u>	
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
anadelane for Implementing the amo-	miment if not contained in the amendment itself.
provisions for implementing the amer	namen is not consumed in the amendment fixen
(if not applicable, indicate N/A)	Note that the wheel where was the way to be a second or the wheel wheel was the way to be a second or the way to be a seco
provisions for implementing the amer	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this document's effective date on the D	plock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors with	out shareholder action and shareholder
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast ufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. It each voting group entitled to vote separately on the	The following statement amendment(s):
"The number of votes case	for the amendment(s) was/were sufficient for appro	val
by		,,,
	(voung group)	_
Dated11 / 25	/ 2024	
Signature	Mauuel Castillo	
selecte	irector, president or other officer – if directors or officer, the directors or officer is an incorporator – if in the hands of a receiver, the fiduciary by that fiduciary)	icers have not been rustee, or other court
	MANUEL CASTILLO	
	(Typed or printed name of person signing	<u>y)</u>
	PRESIDENT/SECRETARY/DIRECTOR	
	(Title of person signing)	