## P950000 70529

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

ALB MAR O PAY 12-23 NAME OF CORPORATION: GLOBAL PROJECTS, INC. P95000070529 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ESTON E MELTONTIL Name of Contact Person GLOBAL PROJECTS, INC. Firm/ Company P.O. BOX 33/87/ Address MIAMI, FL 33233 City/ State and Zip Code dustymelton @ earthlink.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 305 ) 905 · 2400 Area Code & Daytime Telephone Number ESTON E. MELTUNITA Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment** to Articles of Incorporation

GLOBAL PROJECTS, INC.

## (Name of Corporation as currently filed with the Florida Dept. of State)

	P950000 to 529		10 C
	(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607, 100 its Articles of Incorporation:	06, Florida Statutes, this Florida Profit Corpor	ation adopts the f	following amendment
A. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	n the word "corporation," "company," or " on "Corp," "Inc," or "Co". A professional n," or the abbreviation "P.A."	incorporated" o corporation nam	r the abbreviation ne must contain the
B. <u>Enter new principal office address, if a</u> (Principal office address <u>MUST BE A STR</u>			
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF			
	•		
<ul> <li>If amending the registered agent and/o new registered agent and/or the new re</li> </ul>	er registered office address in Florida, enter	the name of the	
•	Control Ville House,		
Name of New Registered Agent	2580 TECUMSEH DRIVE		<del></del>
_	(Florida street address)		<del></del>
	WEST PALM BEACH		27409-8009
New Registered Office Address:	(City)	Florida_	33409-8009 (Zip Code)
	,		, ,
New Registered Agent's Signature, if char		timusi Calama	
i nereoy accept the appointment as registere	d agent. I am familiar with and accept the ob	agations of the p	эхиол.
	Signature of New Registered Agent, if che	mging	

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 Doe	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l)Change	_5	MARIO R. MELTON	P.O. BOX 331871
_X_ Add			MIAMI, FL 33233
Remove			
2) Change	_5	ESTON E. MELTON III	P.O. BOX 33/87/
Add			MIAMI, FL 33233
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			<del></del>
Remove			<del></del>
5) Change			
Add			·
Remove			
6) Change	-		
Add			
Remove			

	(Be specific)
-	
· · · · · · · · · · · · · · · · · · ·	
novisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
(if not applicable, indicate N/A)	inginent to the goldening in the amendment tiser.

The date of each amendment date this document was signed.	(s) adoption:	, if other than the
Effective date <u>if applicable</u> :	MARCH 2, 2019	
<u>n apprensie</u>	(no more than 90 c	lays after amendment file date)
	his block does not meet the applicate Department of State's records.	ole statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The nere sufficient for approval.	umber of votes cast for the amendment(s)
	e approved by the shareholders through for each voting group entitled to vo	gh voting groups. The following statement te separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were	sufficient for approval
by	(voting group)	·
action was not required.	e adopted by the board of directors we adopted by the incorporators withou	ithout shareholder action and shareholder
Dated Signature	MARCH 2, 2019  Show Multi-the way a director, president or other officer	- if directors or officers have not been
sc	•	ands of a receiver, trustee, or other court
	ESTON E. MELTO	NI
	(Typed or printed na	me of person signing)
	TREASURER	
	(Title of	person signing)