P980037457

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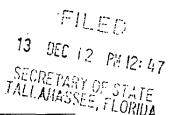
DEC 1 7 2013

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Gold State DOCUMENT NUMBER: P98000037					
The enclosed Articles of Amendment and fee are	submitted for filing.				
Please return all correspondence concerning this n	natter to the following:				
Mario O. Cam	npos, Esq.				
	Name of Contact Person				
Mario O. Cam	ipos, P.A.				
	Firm/ Company				
782 NW 42 A	ve., Suite 350				
	Address				
Miami, FL 33	126				
	City/ State and Zip Code				
mcamposlaw@h	otmail.com				
	used for future annual report notification)				
	•				
For further information concerning this matter, ple	ease call:				
Mario O. Campos at (305) 648-9800					
Name of Contact Person	Area Code & Daytime Telephone Number				
	•				
Enclosed is a check for the following amount made	e payable to the Florida Department of State:				
■ \$35 Fiting Fee □\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) Captificate of Status Certified Copy (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 of



Gold Star Jewelry & Pawn Inc.

(Name of Corporation a	s currently filed with the Flor	rida Dept. of State)		-111074
P98000037457				
(Docume	nt Number of Corporation (if k	nown)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Corporatio	n adopts the following	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
·····				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desigi word "chartered," "professional associo	nation "Corp," "Inc," or "Co	". A professional corp		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				,
				,
D. If amending the registered agent an new registered agent and/or the ne		s in Florida, enter the	name of the	
Name of New Registered Agent	Maria J. San Roma	ın		
	7070 W. 15 Cc	ourt	_	
	(Florida street		00044	
New Registered Office Address:	Hialeah	, Flor	ida 33014	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis		h and accept the obligat	tions of the position.	
	A		y p	
	anature of New Registered Age	ent 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>John D</u>	loe	
X Remove	<u>v</u>	Mike J	one <u>s</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Address</u>
1) Change	PD	_	Ramses Llufrio	7070 W. 15 Court
Add				Hialeah, FL 33014
Remove				
2) Change	PD		Maria J. San Roman	7070 W. 15 Court
Add				Hialeah, FL 33014
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		····		
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	N/A.
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
	N/A

The date of each amendment(s) adoption: December 0, 2013	, if other than the
date this document was signed. December 6, 2013	
Effective date if applicable: December 6, 2013 (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_December 6, 2013	
Signature	
(By a director, prestdent or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
Maria J. San Roman	
(Title of person signing)	