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MAY 0 3 2018 S. YOUNG

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GRACE JS CORP				
DOCUMENT NUME	BER: P13000035776				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	CRISTIAN GIACULLI				
		Name of Contact Person	1		
	G&GJ INTERNATIONAL INVESTMENT				
		Firm/ Company			
	20807 BISCAYNE BLVD. S	SUITE 104			
		Address			
	AVENTURA, FL 33180				
		City/ State and Zip Cod	e		
GYG.	177@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
MACARENA ANGL	ADA	305	407-8979		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301		

## Articles of Amendment

to

## Articles of Incorporation

of

(Ivalue of Corporation as	currently filed with the Florida Dept. of State)
P13000035776	
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuts Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	ation:
	The new
came must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation ic," or "Co". A professional corporation name must contain the
Fatou nous principal office address: if anniholder	<u> </u>
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	
	30 E
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maining duaress MAT BE A POST OFFICE BOX)	
<ol> <li>If amending the registered agent and/or registered off new registered agent and/or the new registered office</li> </ol>	
new registered agent and/or the new registered office  Name of New Registered Agent	
new registered agent and/or the new registered office  Name of New Registered Agent	address:

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	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
I) Change	PT	ANTONIA SABINO	20807 BISCAYNE BLVD	
Add		-	#104	
X Remove			AVENTURA, FL 33180	
2) Change	РТ	SERGIO M. RECCHIA	20807 BISCAYNE BLVD	
X Add			#104	
Remove			AVENTURA, FL 33180	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add			<u></u>	
Remove				
INCHIONE				

If amending or adding : Attach additional sheets	, if necessary). (	Be specific)			
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f an amendment provi	des for an exchan	ge, reclassificatio	on, or cancellation	of issued shares	<b>i.</b>
provisions for impleme (if not applicable, i	enting the amendr	ment if not contai	ined in the amend	ment itself:	_
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	90 days after amendment file date)
(no more than	90 days after amendment file date)
Note: If the date inserted in this block does not meet the app document's effective date on the Department of State's records.	licable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	he number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders the must be separately provided for each voting group entitled to	
"The number of votes east for the amendment(s) was/w	ere sufficient for approval
by	"
by(voting group)	
■ The amendment(s) was/were adopted by the board of director action was not required.	
The amendment(s) was/were adopted by the incorporators wi action was not required.	thout shareholder action and shareholder
Dated 04/23/2018 Outrin	
Signature a Culmini	
	ficer – if directors or officers have not been he hands of a receiver, trustee, or other court y)
ANTONIA SABINO	
(Typed or printed	name of person signing)
PRESIDENT	
(Title	e of person signing)