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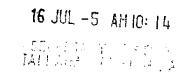
TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GRANADOS GRO	OUP HOLDINGS CORP				
DOCUMENT NUMB						
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
1	HUMBERTO GONZALEZ					
•-		Name of Contact Person	1			
1	RAPID INCOME TAX COR	RP				
-	Firm/ Company					
	11300 NW 87 CT UNIT 150					
-	Address					
]	HIALEAH GARDENS FL 3	3018				
-		City/ State and Zip Cod	િ			
LLCT	АХ@ҮАНОО.СОМ					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
HUMBERTO GONZA	LEZ	at (2908649			
Name of Contact Person		Area Code & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filling 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)			
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassec, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

The state of the s

Articles of Amendment to Articles of Incorporation of



GRANADOS GROUP HOLDINGS CORP

(Name	of Corporation as currer	ntly filed with the Florida Dept. of State)
P14000082811		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
NA		The new
	nation "Corp," "Inc." or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address,		
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	NA
C. Enter new mailing address, if appli		NA
(Mailing address MAY BE A POST	OFFICE BUX	
D. If amending the registered agent an	d/or registered office ed	drass in Florida, antar the name of the
new registered agent and/or the new		
Name of New Registered Agent	NA	
Hame ty Hen negistered rigem		
	(Florida s	street address)
V . D	NA	
New Registered Office Address:		Florida (Zip Code)
		V. V
New Registered Agent's Signature, if c		
I hereby accept the appointment as regist	ered agent. I am familiar	r with and accept the obligations of the position.
	Signature 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>	John Doe			
X Remove	<u>V</u>	Mike Jones			
_X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	Address		
I) Change	VP,D	ISABEL CASTRO	3301 NW 183 ST UNIT 2705		
X Add			AVENTURA FL 33160		
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add			Au The State of th		
Remove					
5) Change					
Add					
Remove					
δ) Change					
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
NA	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
NA	

The date of each amendment(s) add	· 6/19/2016 option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloodeument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date artment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes east for the amendment(s) licient for approval.	
	oved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	t
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted action was not required.	oted by the incorporators without shareholder action and shareholder	
6-18-2016 Dated		
Signature	rector, president or other officer – if directors or officers have not been	
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
l	DIANA A GRANADOS	
-	(Typed or printed name of person signing)	 _