P190000 33333

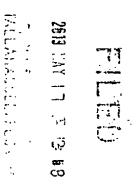
(F	Requestor's Name)	
(<i>f</i>	address)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: GRANIZADOS SOPHIE.	CORP.
DOCUMENT NUMBER: P19000033333	
The enclosed Articles of Amendment and fee are submitted	 for filing.
Please return all correspondence concerning this matter to t	he following:
OSCAR A. AGUILAR	
Nan GRANIZADOS SOPHIE, CORP.	of Contact Person
11949 SW 210TH STREET	Firm/ Company
MIAMI, FL 33177	Address
City	State and Zip Code
CHAMORRO.MAGDALENA@YAHOO	COM
E-mail address: (to be used for	uture annual report notification)
For further information concerning this matter, please call:	
OSCAR A. AGUILAR	at () 380-3323
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable	to the Florida Department of State:
Certificate of Status Ce	3.75 Filing Fee & □\$52.50 Filing Fee rtified Copy Certificate of Status lditional copy is Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

GRANIZADOS SOPHIE, CORP.	FI FO
(Name of Corporation as	currently filed with the Florida Dept. of State)
P19000033333	2013 MAY 1 7 12 13 18 8
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:
	The new
	orporation," "company," or "incorporated" or the abbreviation nc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u> </u>
	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered of	ffice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent	
	-
	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Now Designated Assessed Sciences of the coin Designation	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am	familiar 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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	AGUIALR, OSCAR A.	11949 SW 210TH STREET
Add			MIAMI, FL 33177
X Remove			
2) Change	P	AGUILAR, OSCAR A	11949 SW 210TH STREET
X Add			MIAMI. FL 33177
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	. <u>. </u>		
Add			
Remove			

E. If amending or adding additional Articles, enter chair	i <u>zeta) nere.</u>
(Attach additional sheets, if necessary). (Be specific)	
, <u>, , , , , , , , , , , , , , , , , , </u>	
<u> </u>	
	-
· ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·-	
	<u> </u>
F. If an amendment provides for an exchange, reclassifi	anting or aspectation of invest shares
provisions for implementing the amendment if not c	entries die the amandment it elf-
General Problems in Proceedings of the American in not c	ontained in the amendment itsen:
(if not applicable, indicate N/A)	
	- -
	<u> </u>

05/14/2019	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
05/14/2019	
Effective date if applicable:	1 00 t c 1 01 t 1
(no more t	han 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval.	. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholde must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) wa	s/were sufficient for approval
bv	
(voting group)	
☐ The amendment(s) was/were adopted by the board of direction was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporator action was not required.	s without shareholder action and shareholder
05/14/2019	
Dated	<u> </u>
Signature & Bunk Gue	he
(By a director, president or othe	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court cary)
OSCAR A. AGUILAR	
(Typed or pr	nted name of person signing)
PRESIDENT	
	Title of person signing)

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