

(Requestor's f	Name)
(Address)	
(Address)	
(City/State/Zip	VPhone #A
(City/State/Zip	WETTOTIE #)
PICK-UP W	AIT MAIL
(Business En	ity Name)
(Document N	ımher)
(Sosamoni)	
	·
Certified Copies Cert	incates of Status
Special Instructions to Filing Office	er:
	Ì

Office Use Only



200319386632

10/16/18--01043--005 **52.50

2018 OCT 15 PH 4: 12

C GOLDEN
OCT 2 3 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI			L COR	P
DOCUMENT NUMBER:	P1600009926	1		<u> </u>
The enclosed Articles of Ar	mendment and fee are su	bmitted for fili	ng.	
Please return all correspond	lence concerning this mat	ter to the follo	wing:	
CF	RISTIAN GIACU	JLLI		
		Name of C	ontact Person	
G8	&GJ INTERNA ⁻	ΓΙΟΝΑL	INVEST	MENT
	· · · · · · · · · · · · · · · · · · ·	Firm/ (Company	
20	807 BISCAYNI	E BLVD.	STE10	4
		Ad	dress	
A۱	/ENTURA, FL 3	33180		
		City/ State	and Zip Code	
ggjiinv	estment@gma	il.com		
	E-mail address: (to be us	ed for future a	nnual report	notification)
For further information con	cerning this matter, pleas	e call:		
MACARENA AN	NGLADA	at :	305	407-8979
Name of Co	ntact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check for the	following amount made [payable to the	Florida Depa	rtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified (Additional enclosed)	Copy ol copy is	Certificate of Status Certified Copy (Additional Copy is enclosed)
Division P.O. Box	ent Section of Corporations		Amend Divisio Cliston	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 OCT 15 PM 4: 12

G1 INVESTMENT FL CORP.

SECRETARY OF STATE
TALLAHASSEE, FI

(Name of Corporation as currently fil	led with the Florida Dept. of State)	TALLAHASSEE, FI
P16000099261		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation ac	dopts the following amendment(s) to
A. If amending name, enter the new name of the con	rporation:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association." or the d	" "Inc." or "Co". A professional corpore	orated" or the abbreviation attion name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD.		
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BO)	<u>X</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		ne of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regi I hereby accept the appointment as registered agent.		s of the position.
Signature of Nev	w 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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	ANTONIA SABINO	20807 BISCAYNE BLVD
Add			STE 104
✓ Remove			AVENTURA, FL 33180
2) Change	P	EMANUEL ZACARIAS	20807 BISCAYNE BLVD
Add			STE 104
Remove			AVENTURA, FL 33180
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach	additional sheets, i		e specific)			
	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
	<u> </u>					
		 				
	· · · · · · · · · · · · · · · · · · ·					
<u>-</u>			·			٠.
	 					
	<u> </u>	 				
	· · · · · · · · · · · · · · · · · · ·					
	 					
	<u></u>					
				· · · · · ·		
						
	· · · · · · · · · · · · · · · · · · ·					
		 -				
provi	mendment provide sions for implemer f not applicable, inc	ting the amendme	e, reclassification ent if not contain	, or cancellation o	of issued shares, nent itself:	
				-		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 10/08/2018 Q. Saln'm	
g. 400 000	
(By a director, president 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)	
ANTONIA SABINO	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	_