446636

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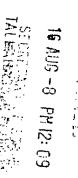
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R. WHILE



COVER LETTER

TO: Amendment Section

Division of Corpo	rations		
NAME OF CORPOR	ATION: Garosasi, Inc.	·	
DOCUMENT NUMB			
	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
,	Elizabeth B. Hernandez		
-		Name of Contact Person	n
-		Firm/ Company	
2	2416 S. Andrews Avenue		
-		Address	
1	Fort Lauderdale, FL 33316		
_		City/ State and Zip Cod	e
Liz@t	hefloridamarket.com	•	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Elizabeth B. Hernande	z	at (954.	, 804-1104
Name o	f Contact Person	Area Co	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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Fllming

16 AUG -8 PH 12: 09

Garosasi, Inc.	**		
(Name of Corporation as current	ly filed with the Florida Dept. of State		
446636	TAKE SECTION OF THE PROPERTY O		
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporation" ("Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	2416 S. Andrews Avenue		
Principal office address <u>MUST BE A STREET ADDRESS</u>)	Fort Lauderdale, FL 33316		
·			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2416 S. Andrews Avenue		
	Fort Lauderdale, FL 33316		
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address			
new registered agent and/or the new registered office address			
new registered agent and/or the new registered office address Name of New Registered Agent			
new registered agent and/or the new registered office address Name of New Registered Agent	<u>S:</u>		

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	Elizabeth B. Hernandez		
X Add				
Remove				
2) Change	TD	Manuel Garcia	699 E. Okeechobee Road	
Add			Hialeah, FL 33010	
X Remove		•		
3) Change	SD	Joseph M. Rodriguez	1250 SW 27th Avenue	
Add			Miami, FL 33134	
X Remove			·	
4) Change	P	Julieta Sacre	699 E. Okeechobce Road	
Add			Hialeah, FL 33010	
X Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets	additional Artics, if necessary).	(Be specific)				
-						
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f an amendment provi provisions for implem (if not applicable,	nenting the amen	ange, reclassific	ation, or cancella entained in the an	ntion of issued sh nendment itself:	ares,	
				•		
	<u> </u>			•		
				•		

The date of each amendment(s) a date this document was signed.	idoption;	_, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were st	opted by the shareholders. The number of votes east for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes east	r for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 7/2	28/2016	
selecto	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	Elizabeth B. Hernandez	
	(Typed or printed name of person signing)	**************************************
	President	
	(Title of person signing)	-