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F94000	003814
(Requestor's Name) (Address)	200390558332
(Address)	2000000002
(City/State/Zip/Phone #)	07/08/2201011019 **48.75
(Business Entity Name)	
(Document Number) Certified Copies Certificates of Status	2622 NOV 1
Special Instructions to Filing Officer:	6 Fil 4:49
When form Office Use Only	Omend

DEC 0 8 2022

D CUSHING

## **COVER LETTER**

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	nt Section Division of Corporation			
SUBJECT:	Granmar Produce	de Inc.		
DOCUMENT NU	Name MBER: F940000	of Corporation 03814		
	ndment and fee are submitted for f			
Please return all co	rrespondence concerning this matt	er to the following:		
Deb	bie Guadrado			
-	Name of Contact Person	<u> </u>		
Grai	mar Products	Inc		
	Firm/Company			
2731	NW 104 600	r+		
	Address			
Dora	I FL 331	72		
	City/State and Zip Code			
debbie@	granmar.com	$\widehat{}$		
	ss: (to be used for future annual re		· 2[	
For further informa	tion concerning this matter, please	e call:	)22 h	• • • •
Rodr	igo Pardo of Contact Person	at 305 785	5 - 5384 <sup>28</sup> Felephone Number <sup>2</sup>	<u></u>
Name	of Contact Person	Area Code & Daytime 1		•
	for the following amount:			, <i>,</i> †
□\$35 Filing Fee	Certificate of Status	\$43.75 Filing Fee & Certified Copy	Certificate of Status & Certificate Of Status	
	<b>A</b> . 1			

PAID Already

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

October 11, 2022

**RODRIGO PARDO GRANMAR PRODUCTS INC** P.O. BOX 228014 MIAMI, FL 33172

SUBJECT: GRANMAR PRODUCTS, INC. Ref. Number: F9400003814

We have received your document for GRANMAR PRODUCTS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida Corporation, but your entity is a Foreign Corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 722A00022770

**MH11:12** 

www.sunbiz.org

Distation of Co. DO DOV 0207 Trallaharras Elasida 20214

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PROFIT CORPC	DRATION	
APPLICATION BY FOREIGN PROFIT CORPORATIO AUTHORIZATION TO TRANSA		CATION FOR
(Pursuant to s. 60		
SECTIO (1-3 MUST BE C		
F9400003		
(Document number of co	prporation (if known)	
1. Granmar Products Inc (Name of corporation as it appears on the		
(Name of corporation as it appears on the		
2. <u>Georgia</u> (Incorporated under laws of)	3. 01/18/95	
(Incorporated under laws of)	(Date authorized to do business	in Florida)
SECTIO	DN II	
(4-7 COMPLETE ONLY THE		
4. If the amendment changes the name of the corporation, when was the	change effected under the laws of its jurisd	liction of
incorporation? <u>N/A</u> Not applicable	enange effected under the laws of his jurisd	
5 Not applicable		
5. Not applicable	" "company" or "incorporated " or appre	priate abbreviation
(Name of corporation after the amendment, adding suffix "corporation not contained in new name of the corporation)	i, company, or meorporated, or appre	
(If new name is unavailable in Florida, enter alternate corporate name a	adopted for the purpose of transacting bus	iness in Florida)
6. If the amendment changes the period of duration, indicate new pe	priod of duration	
Not app	T TEU BIE	200
(New dur	ation)	.022 H
		0
7. If the amendment changes the jurisdiction of incorporation, indica	ate new jurisdiction.	5 6
Not	applicable	
(New jurise		۰۰ مند متر میل
		61:1
8. If amending the registered agent and/or registered office address	in Florida, onter the name of the	, o
new registered agent and/or the new registered office address:	in riorma, cher the name of the	

	(Florida stre	et address)		
<u>New Registered Office Address:</u>	•	upplicable	, Florida	
<u></u>	(City)			(Zip Code)

Not applicable

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Name of New Registered Agent

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

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- Z - 1

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<u>Title/ Capacit</u>	<u>Name</u>	Address	Type of Action
VP	Alan D. Pardo	2731 NW 104 Court I Florida	Doral HAdd
			Add
			CRemove
			🛛 Add
			Remove
			🗖 Add
			CRemove
		<u> </u>	🗆 Add
			Remove
0. Attached is of the appli under the l	s a certificate or document of similar import, evid ication to the Department of State, by the Secretary aws of which it is incorporated.	encing the amendment, authenticated n of State or other official having custody	ot more than 90 days prior to deli of corporate records in the jurisdi-
	(Signature of a director, a receiver or other cour Rodrigo Pardo	president or other officer - if in the han tappointed fiduciary, by that fiduciary)	ds of dent
- <u>-</u>	(Typed or printed name of person signing)		rson signing)

FILING FEE \$35.00