

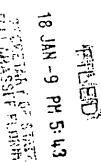


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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: GVF INC
DOCUMENT NUMBER: X 31766
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person GVF INC. Firm/ Company 7770 SW 155 Street Address Palme Ho Bay Fla 33157 City/ State and Zip Code 9 V F INC & Dell South . he Te Je-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Guillermo Valdes-FAULi at 305, 598-8289 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:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation of

Gr. V. F. INC.				
(Name of Corporation as current)	y filed with the Florida D	ept. of State)		
K 217/	1010			
(Document Number of	f Corporation (if known)	-		
	•	-		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation	i adopts the follow	ring amendment	:(s) to
A. If amending name, enter the new name of the corporation:	N/A		The	
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 "B. Enter new principal office address, if applicable:	Co". A professional corp			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	,	1		
C. Enter new mailing address, if applicable:		**************************************	18 JAN	• •
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		A Figure	-9 PH 5:	.
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address		name of the	્રું દેં	. -
Name of New Registered Agent	N/A			
(Florida str	vet address)			
New Registered Office Address:		. Florida		
	(City)	(Zi	ip Code)	
New Registered Agent's Signature, if changing Registered Agent:	:			
I hereby accept the appointment as registered agent. I am familiar v		ion's of the positior	1.	
N/	Á			
Signature of New R	Praistered Apont if changin	10		

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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Sn	nith		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change	\Box		INMER	Bernabe	1 34 NW 17 Place
Add Remove					34 NW 17 Place # 3 MIAMI, F1 33125
2) Change Add		_			
Remove 3) Change					1
Add					
4) Change					
Add Remove					
5) Change		-			
Add Remove					1
6) Change		_			
Add					
Remove					

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stach additional sheets, if necessary). (Be specific)	· ·
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N/A	
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an amendment provides for an exchange, reclassification, or cancellation operations for implementing the amendment if not contained in the amendm	f issued shares, ent itself:
(if not applicable, indicate N/A)	
N/A	
	l .
·	

The date of each amendment(s) adoption:	N/A		_, if other than the
date this document was signed.	. / •		
Effective date <u>if applicable</u> :	\mathcal{N}/A		
(no	more than 90 days after amendment	t file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State'		quirements, this date will i	not be listed as the
Adoption of Amendment(s) (CHECK	ONE)	1	
The amendment(s) was/were adopted by the sharely by the shareholders was/were sufficient for approximation.	nolders. The number of votes cast for al.	or the amendment(s)	
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group			
"The number of votes cast for the amendmen	t(s) was/were sufficient for approva	1	
by(voting gr			
(voling gr	·оир)	<u> </u>	
The amendment(s) was/were adopted by the board action was not required.	of directors without shareholder act	tion and shareholder	
☐ The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action a	and shareholder	
Dated	7 / / /		
Signature (fullers)	lilde time	<u> </u>	_
	or other officer — if directors of offic tor — if in the hands of a receiver, tr		
appointed fiduciary by th			,
Guil	Hermo Valda	es. FAUL	<u>-1</u>
(Турес	d or printed name of person signing))	
	President		
	(Title of person signing)		