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(Re	questor's Name)	***************************************
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(Cit	ry/State/Zip/Phone	e #)
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R. WHITE

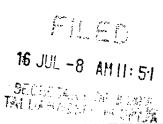
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BLUE GRASS CO	DRPORATION	
DOCUMENT NUMB	P02000088701		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	WALTER IGAYARA DE SO	OUZA JUNIOR	
-		Name of Contact Person	1
	BLUE GRASS CORPORAT	TION	
•		Firm/ Company	
	1010 FALLING LEAF STRE	, ,	
•		Address	· · · · · · · · · · · · · · · · · · ·
	CELEBRATION FL 34747		
•		City/ State and Zip Cod	e
taxma	n1@cfl.rr.com		
	•	sed for future annual report	notification)
	concerning this matter, pleas	407	301-5465
Name o	f Contact Person	at (Area Co)de & Daytime Telephone Number
	the following amount made		·
□ \$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)
Ame Divis P.O.	ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BLUE GRASS CORPORATION

		NO STEEL	
(<u>Name o</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	
P02000088701			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new na	ame of the corporation:		
		The new	
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:		1010 FALLING LEAF STREET	
(Principal office address MUST BE A S		CELEBRATION FL 34747	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1010 FALLING LEAF STREET	
		CELEBRATION FL 34747	
D. If amending the registered agent ar	nd/or registered office ad	dress in Florida, enter the name of the	
new registered agent and/or the ne			
Name of New Registered Agent	WALTER IGAYARA DE SOUZA IUNIOR		
traine of their Registered rigem	1010 FALLING LEAF S	STREET	
	(Florida s	street address)	
Now Desirence of Office Address	CELEBRATION	. Florida 34747	
New Registered Office Address:		(City) (Zip Code)	
		(City) (Zip Code)	
	<i>(</i>	. /	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		with and accept the obligations of the position.	
r neresy accept the appointment as regis-		This and decept the congunous of the positions.	
/_/	/ ////////////////////////////////////	-	
\times M			
`	Jignature 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	$\underline{\mathbf{v}}$	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	RODOLFO GALVAO	840 NORTH BASS ROAD
Add X Remove			KISSIMMEE FL 34746
2) Change	v	DANIELA GALVAO	840 NORTH BASS ROAD
Add	•		KISSIMMEE FL 34746
X Remove	P	WALTER IGAYARA DE SOUZA JI	1010 FALLING LEAF STREET
3) Change X Add	-		CELEBRATION FL 34747
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
	
-	

JULY 1 2016	10 11 11 11
	, if other than the
date this document was signed.	
JULY 1 2016	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 50 days after amenament fite date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
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 east 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. 	
Signature (By a director president by 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)	
appointed reducing of sint reducing;	
WALTER IGAYARA DE SOUZA JUNIOR	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	