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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FIRENZE GROU	P CORPORATION			
DOCUMENT NUMB	P0800000344				
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	ROBERTO WOLFF				
•		Name of Contact Persor	1		
	FIRENZE GROUP CORPORATION				
-	Firm/ Company				
	299 PARK ST , # 1				
•	Address				
	MIAMI SPRINGS, FL 33166				
•		City/ State and Zip Code)		
	RWOLFF@FIRENZEGRO	UP.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se cail:			
ROBERTO WOLFF		at (305	882-0933		
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	rtment 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		Amend	Address ment Section n of Corporations		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
	hassee, FL 32314	2661 E	xecutive Center Circle		
		Tallaha	ssee FL 32301		

Articles of Amendment to Articles of Incorporation of



FIRENZE GROUP CORPORATION

2016 OCT 17 PM 2: 14

(Name o	of Corporation as currently	filed with the Florida I	Dept. of State)
P08000000344			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this J	lorida Profit Corporatio	n adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional corp	
B. Enter new principal office address,			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the	name of the
Name of New Registered Agent	ALDO SAAVEDRA		
	299 PARK ST # 1		Add 100 mar 2 10 1 1 1 mar 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(Florida stre	et address)	
New Registered Office Address:	MIAMI SPRINGS		, Florida 33166
TOW ICE MINOR CONTROL TIME CONTROL	(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obliga	tions of the position.
	Dears	Daved.	
	Signature of New Re	gistered A gent, if changi	ng

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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			*****
Remove			
2) Change			
Add			
Remove			.
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
f 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 and an analysis of the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and the amendment itself;

	OCTOBER 12th, 2010	
The date of each amendment(s)	adoption:	if other than the
date this document was signed.		THE OTHER THAN THE
Persetive data if applicables	OCTOBER 12th, 2016	• •
Effective date if applicable:	(no more than 90 days after amendment file date)	2016 OCT 17 PM 2: 14
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendn sufficient for approval.	nent(s)
	approved by the shareholders through voting groups. The following sta for each voting group entitled to vote separately on the amendment(s).	
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
- ,	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and share adopted by the incorporators without shareholder action and sharehold	
action was not required.		
	er 12th, 2016	
Dated		
a :		
Signature	director, president or other officer – if directors or officers have not	seen
_ ` * /	eted, by an incorporator – if in the hands of a receiver, trustee, or other	
	inted fiduciary by that fiduciary)	•
	Roberto Wolff	
	(Typed or printed name of person signing)	
	VP/CFO	
	(Title of person signing)	