P0800000344

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SECRETARY OF STATE

34H 11 2016 T. LEMPEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: FIRENZE GROUP	CORPORATION	
DOCUMENT NUMI	P0800000344		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	ROBERTO WOLFF		
		Name of Contact Person	1
	FIRENZE GROUP CORPOR	ATION	
	*****	Firm/ Company	
	299 PARK ST # 1		
		Address	
	MIAMI SPRINGS, FL 33166	i	
		City/ State and Zip Cod	e
RWo'	ff@firenzegroup.com		
		ed for future annual report	notification)
	2 11211 1121-1121 (10 00 12	To to the second second	,
For further information	n concerning this matter, pleas	e call:	
ROBERTO WOLFF		at (_) 882-0933
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made 1	payable to the Florida Depa	uriment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FIRENZE GROUP CORPORATION

FILED 2017 JAN -9 P 3 39

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendments Articles of Incorporation: A. If amending name, enter the new name of the corporation:	(Name	of Corporation as currently fil	ed with the Florida Dent of State).
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendates Articles of Incorporation: The new pame, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation (Corp., "Inc.," or "Co.", A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS			TALLAHASEE PERSIA
Articles of Incorporation: If amending name, enter the new name of the corporation: The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: principal office address MUST BE A STREET ADDRESS. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS.		(Document Number of Co.	rporation (if known)
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ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the ord "chartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS (Mailing address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address)	. If amending name, enter the new n	ame of the corporation;	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS	Corp.," "Inc.," or Co.," or the design	nation "Corp," "Inc," or "Co"	"company," or "incorporated" or the abbreviation A professional corporation name must contain the
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If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS	. Enter new mailing address, if appl	icable:	
Name of New Registered Agent MARIMARIE VANOVER	(Mailing address MAY BE A POST	OFFICE BOX)	
Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS 33166		_	
Name of New Registered Agent MARIMARIE VANOVER 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS 33166		_	
Name of New Registered Agent 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS 33166			in Florida, enter the name of the
Name of New Registered Agent 299 PARK ST # 1 (Florida street address) MIAMI SPRINGS 33166	new registered agent and/or the ne		
(Florida street address) MIAMI SPRINGS 33166	Name of New Registered Agent	MARIMARIE VANOVER	·····
MIAMI SPRINGS 33166			
New Registered Office Address: , Florida , Florida		·	•
(City) (Zip Code)	New Registered Office Address:		, Florida
(City) (Zip Code)		(Cii)	(Esp Code)
			1 (d. 10 a) (d. 10
	nereby accept the appointment as regist	terea agent. I am familiar with	and accept the obligations of the position.
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	W/	arimarie /01	Will
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	- 1	Signature of New Regis	tered 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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PCEO	ALDO SAAVEDRA	299 PARK ST # 1
Add X Remove			MIAMI SPRINGS, FL 33166
2) X Change	PCFO	ROBERTO WOLFF	2555 COLLINS AVE # 2408
Add			MIAMI BEACH, FL 33140
Remove			***************************************
3) Change			
Add			***
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		···	· ··· · · · · · · · · · · · · · · · ·
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(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, andment if not contained in the amendment itself:
	· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption:	January 2nd, 2017	, if other than the
date this document was signed.		, ii odici dian di
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block doe document's effective date on the Department	es not meet the applicable statutory filing requirements, this date will of State's records.	l not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the amendment(s) or approval.	
	the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):	
	mendment(s) was/were sufficient for approval	
by	(voting group)	
((voting group)	
	the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by t action was not required.	the incorporators without shareholder action and shareholder	
January 6th, 2017 Dated		
Signature	\sim	
(By a director, p	resident or other officer - if directors or officers have not been	
	incorporator – if in the hands of a receiver, trustee, or other court iary by that fiduciary)	
ROBER	TO WOLFF	
	(Typed or printed name of person signing)	
	President, CFO	
	(Title of person signing)	

._ . . .