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JUL 20 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: THE ZAMORAN	O GROUP, CORP	
DOCUMENT NUME			
	of Amendment and fee are st	ibmitted for filing.	
Please return all corres	pondence concerning this ma	atter to the following:	
	OLGA P. ZAMORANO		
•		Name of Contact Perso	n
	THE ZAMORANO GROUP	, CORP	
		Firm/ Company	
	6820 NW 81 PL		
	•	Address	
	TAMARAC, FL 33321		
•		City/ State and Zip Cod	e
TZGC	ORP@YMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information OLGA P. ZAMORAN	concerning this matter, pleas		793-3829
Name o	f Contact Person	at (Area Co	793-3829 de & Daytime Telephone Number
	the following amount made		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section in of Corporations Building xecutive Center Circle issee, FL 32301

Articles of Amendment

to Articles of Incorporation of

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7			

THE ZAMORANO GROUP, CORP	¥ ۥ,
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P08000005123	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporat, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	dress in Florida, enter the name of the
Name of New Registered Agent	
/Florida	treet address)
·	
New Registered Office Address:	(City) , Florida (Ztp Code)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
New Registered Agent's Signature, if changing Registered Agen	<u>tt:</u>
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature 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: XChange	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	IVAN M. RODRIGUEZ	6820 NW 81 PL
Add			TAMARAC, FL 33321
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
f) Change			
Add			
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an amendment provides for an exc	hange, reclassifi	cation, or cancell:	ntion of issued sh	ares.	
provisions for implementing the am	hange, reclassifi endment if not c	cation, or cancell: ontained in the ar	ation of issued sha nendment itself:	ares,	
an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	hange, reclassifi endment if not c	cation, or cancell: ontained in the ar	ation of issued sha nendment itself:	ares,	
provisions for implementing the am	hange, reclassifi endment if not c	cation, or cancell ontained in the ar	ntion of issued sha nendment itself:	ares.	
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provisions for implementing the am	hange, reclassifi endment if not c	cation, or cancell ontained in the ar	ation of issued sha nendment itself:	ares.	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
07/0	06/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this darpartment of State's records.	ite will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were si	opted by the shareholders. The number of votes cast for the amendment(strictent for approval.	s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated } }-	6/2017	
Dated 7-/ Signature O	alsz	
(By a d selecte	irector, president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other cour ed fiduciary by that fiduciary)	t
	OLGA P. ZAMORANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	