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SECREYARY OF STATE

C. GOLDEN 00T 2 3 2018

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TRUMP TO	OWER 904 COR	Р
DOCUMENT NUMBI	<sub>R:</sub> P0900008154	6	
	Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
(	CRISTIAN GIACI	ULLI	
_		Name of Contact Persor	1
<u>.</u>	G&GJ INTERNA	TIONAL INVEST	MENT
		Firm/ Company	
<u>.</u>	20807 BISCAYN	E BLVD. STE10	4
		Address	
,	AVENTURA, FL	33180	
_		City/ State and Zip Code	•
ggjii	nvestment@gma	ail.com	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MACARENA	ANGLADA	at (305	407-8979
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address dment Section ion of Corporations 30x 6327 nassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## FILED

## Articles of Amendment to Articles of Incorporation of

2018 OCT 15 PM 4: 23

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SECULIARY OF STATE TALLAHASSEE, FL

(Name of Corporation as currently filed with the I	Torida Dept. of State)
P09000081546	
(Document Number of Corporation (	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	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 "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or word "chartered," "professional association," 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 MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	ress in Florida, enter the name of the s:
Name of New Registered Agent	
(Florida si	rect address)
New Registered Office Address:	, Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	<u>ti</u>
I hereby accept the appointment as registered agent. I am familiar	wun ana ассері іне обиданоня ој the position.
Signatura of Nay Registered	Count if alignming

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>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		<u>Name</u>	<u>Addres</u> s
1) Change	Р		SERGIO RECCHIA	20807 BISCAYNE BLVD
Add	-	_		STE 104
Remove				AVENTURA, FL 33180
2) Change	Ρ		EMANUEL ZACARIAS	20807 BISCAYNE BLVD
Add		_		STE 104
Remove				AVENTURA, FL 33180
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add	<del></del>			
Remove				<del></del>
6) Change	_			
Add				
Remove				

(Attach addition	al sheets, if necessary). (E	3e specific)		
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If an amendm	nt provides for an exchang	ge, reclassification	, or cancellation of	issued shares,
provisions to	implementing the amendrolicable, indicate N/A)	nent it not contain	ed in the amendme	nt itseii:
(y nor up)	neuble, maleute 7471)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
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.	
Dated 10/09/2018	
Signature	
(By a director, president or 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)	
SERGIO RECCHIA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<del></del>