PIDOCCO 71503

(Re	questor's Name)	
(Ad	dress)	
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(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP		MAIL
<u> </u>	olana Takini Nasa	
(Bu	isiness Entity Nam	ie)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: BANANAS GROUP FNC. DOCUMENT NUMBER: P100000 71503
DOCUMENT NUMBER: 10000 7/503
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NELA GUNZALIZZ Name of Contact Person
BANANAS GIZOUP INC. Firm/ Company 27501 S. DIXIE HWY, # 403 Address
Firm/ Company
27501 S. DIXIE HWY, #403
Address AARANJA FL 33032 City/ State and Zip Code
NARANJA, FL 33032
City/ State and Zip Code
AGONZALAZ DANASO TOUP Q AMAIL. COM E-mail address: (to be used for future anadal report notification)
For further information concerning this matter, please call:
NFLA GON ZALBZ at (305) 257-1000 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status (Additional copy is enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Articles of Incorporation

	of	, ac		٠,٠	
BANANA	LS 62	auf 1	THC.		
(Name of Corporati				ite)	
	71502				
	ment Number of C		nown)	•	
ursuant to the provisions of section 607,1006, Florida s Articles of Incorporation;	a Statutes, this FI	orida Profit Coi	poration adopts the	e following amendn	् ient(s) t
. If amending name, enter the new name of the co	orporation:				
				The ne	
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp. ord "chartered," "professional association," or the	o, " "Inc," or "Co	o". A professio A."	nal corporation na	ime must contain th	1e
3. Enter new principal office address, if applicable	e:	27501	S. DIX	IF HUY.	#40
Principal office address <u>MUST BE A STREET ADL</u>		NARANTI	4 F1 3	15 HWY. 33032	1
		MANAGE			
		-			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	1 V)				
(Sturing duarets STAT BE A POST OFFICE BO	<u>/X</u>)				
). If amending the registered agent and/or register	red office addres	s in Florida, en	ter the name of th	e	
new registered agent and/or the new registered		is in a warming the	ter the hame or to	<u>-</u>	
Name of New Registered Agent					
	(Florida street	t address)			
New Registered Office Address:			, Florida	23	
MA REGISTER Office May 153	ıC	lity)	. 1 10110.	(Zip Code)	
New Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		th and accept the	oblivations of the	position	
	- 2,rammar + 11	and and premi	igunumi vy me	je voda si voda.	
Sign	iature of New Reg	fistered 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 <math>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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	P CONCEPCION LEYVA	16891 NW 87 COURT
Add		MINMI LAKES FL. 33018
Remove		
2) Change	V EINICHIS LEYVA	16891 NW 87 CT
Add Remove		MIAMI LAKES, FC 33018
3) X Change	VT NELA GONZALEZ	12030 SW 272 [FARIL
Add		Homestrans, Fl. 33032
Remove		
4) Khange	PS RAFAEL LEYVA	12030 SW 272 TEAN
= Add		HUMESTRAD, FC. 33022
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

	(Be specific)	
<u>-</u>		
		
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Tan amondment provides for an evol	hanga variageification as approbletion of issued shows	<u> </u>
<u>provisions for implementing the amo</u>	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendme flicient for approval.	intis)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	alder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	,
Dated5/	21/19	
Signature	fly	
(By a di selected	rector, president or other officer – if directors or officers have not be f, by an incorporator – if in the hands of a receiver, trustee, or other ced fiduciary by that fiduciary)	
	RAFARL LEYVA (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESINENT SECRETARY (Title of person signing)	
	(Title of person signing)	