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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SERGRA	77 CORP	
DOCUMENT NUMBER: P1100001225	51	
The enclosed Articles of Amendment and fee are so	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
CRISTIAN GIAC	ULLI	
	Name of Contact Person	1
G&GJ INTERNA	TIONAL INVEST	MENT
	Firm/ Company	
20807 BISCAYN	E BLVD. STE10	4
	Address	
AVENTURA, FL	33180	
	City/ State and Zip Code	9
ggjiinvestment@gma	ail com	
	sed for future annual report	notification)
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
For further information concerning this matter, plea	se call:	
MACARENA ANGLADA	at (305	407-8979 de & Daytime Telephone Number
Name of 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 & 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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$C \square$	\Box	$D \Lambda$	77	\cap	DE

SECRETARY OF STATE TALLAHASSEE, FL

(Name of Corporation as currently filed with the Florida Dept. of State) P11000012251 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name 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 word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _, Florida New Registered Agent's Signature, if changing Registered Agent: 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: X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> .	<u>Addres</u> s
() Change	Р	ANTONIA SABINO	20807 BISCAYNE BLVD
Add			STE 104
Remove			AVENTURA, FL 33180
2) Change	<u>P</u>	EMANUEL ZACARIAS	20807 BISCAYNE BLVD
Add			STE 104
Remove			AVENTURA, FL 33180
3) Change			<u> </u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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f an amendment provides for an exch. provisions for implementing the amer (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
,	

The date of each amendment(s) adoption:	, if other than the
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 cast for the amendment(s) was/were sufficient for approval	
by" (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 10/08/2018 Que Sulvim	
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)	
ANTONIA SABINO	
(Typed or printed name of person signing)	_ _
PRESIDENT	
(Title of person signing)	