

(I	Requestor's Name)	
(/	Address)	
()	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ MAI	L
(1	Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of Status	- -
Special Instructions	to Filing Officer:	

Office Use Only



900252247199

10/03/13--01007--020 **43.75

OCT -3 PH 3: 56
SECRETARY OF STATES
SECRETARY OF STATES

OCT 10 2013 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: C.I.L. GRC	DUP, INC.
DOCUMENT NUMBER: P1100007080	00
The enclosed Articles of Amendment and fee are su	
Please return all correspondence concerning this ma	utter to the following:
Ichin Chu	
	Name of Contact Person
C.I.L. Group, Inc.	
	Firm/ Company
9068 Lake Avon	Dr.
	Address
Orlando, FL 3282	29
	City/ State and Zip Code
international@mirag	elimited.com
E-mail address: (to be us	sed for future annual report notification)
For further information concerning this matter, pleas	se call:
Mattia Porzi	at (407) 371-1995
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:
■ \$35 Filing Fee	\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301

FILED

Articles of Amendment to
Articles of Incorporation

SECRETARY OF STATES
WALLAHASSEE, FLORIDA

Articles of Incorporation of C.I.L. GROUP, INC.

(Name of Corporation as currently filed with the Flo	orida Dent. of State)
P11000070800	,
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Iorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
UMBRA TRUFFLES, INC.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C word "chartered," "professional association," or the abbreviation "P B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
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: Name of New Registered Agent Name of New Registered Agent	ss in Florida, enter the name of the
(Florida stree	t address)
New Registered Office Address: (City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a Signature of New Registered Agent.	

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, Y as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>John</u>	ı <u>Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
T) Change	MRS	ICHIN CHU	9068 Lake Avon Dr.
Add			Orlando, FL 32829
X Remove			
2) Change	Р	MATTIA PORZI	9068 Lake Avon Dr.
X Add			Orlando, FL 32829
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additio	or adding additional Aronal sheets, if necessary).	(Be specific)			
			· 		
	· · · · · · · · · · · · · · · · · · ·				
					
				<u>-</u>	<u></u>
	-				
				·	
		<u> </u>		<u></u> ,	
		<u> </u>	<u>-</u>		
	*				
					
•					
If an amanda	nent provides for an exc	ohanga raplassifis	ation or cancellati	an of issued chares	
provisions fo	or implementing the am	endment if not co	ntained in the ame	ndment itself:	
(if not ap	oplicable, indicate N/A)				
					18.111.
				<u> </u>	
					-
					
	•••			··· · · · · · · · · · · · · · · · · ·	

The date of each amendment	September 26, 2013	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)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/web by the shareholders was/web.	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/well action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	09/26/2013	
Signature	William IC Francisco en Climate have not been	
Se	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Ichin Chu	
	(Typed or printed name of person signing)	
	President, Director	

(Title of person signing)