P110000011854

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: USA OCEA	N PLACE COR	P	
DOCUMENT NUM	BER: P1100007185	4		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	CRISTIAN GIACI	JLLI		
		Name of Contact Person		
	G&GJ INTERNAT	TIONAL INVEST	MENTS	
		Firm/ Company		
	20807 BISCAYNI	E BLVD. STE 10)4	
	Address			
	AVENTURA, FL	33180		
		City/ State and Zip Code	•	
gy	gj77@gmail.com			
*******	E-mail address: (to be us	sed for future annual report	notification)	
For further information concerning this matter, please call:				
CRISTIAN C	GIACULLI	at (305	9877240	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee	■\$43.75 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)	
An Div P.C	niting Address endment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

USA OCEAN PLACE CORP	
(Name of Corporation as currently filed with the Florid	da Dept. of State)
(Document Number of Corporation (if kno	own)
•	,
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida 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 "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation . A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	28
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
-	TILE CONTROL OF THE C
-	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street a	ıddress)
New Registered Office Address: (City)	, Florida (Zip Code)
(cuy)	(Elp Code)
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 Ager	nt, 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PT	ISABEL E. SOFIA PENA	20533 BISCAYNE BLVD.
Add			AVENTURA, FL 33180
Remove			
2) Change	PT	EMILIANO GUIÑAZU	20807 BISCAYNE BLVD.
Add			STE. 104
Remove			AVENTURA, FL 33180
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessar	Articles, enter chary). (Be specific)			
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an amendment provides for an	exchange, reclass	fication, or canc	ellation of issued	l shares,
rovisions for implementing the a (if not applicable, indicate N/A	<u>amendment if not</u> 4)	contained in the	amendment itse	<u>16:</u>
(3, 7	-,			
		 		
			·	
	 			
				· · · · · · · · · · · · · · · · · · ·

	loption:	, if other than th
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 add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 12/1	7/15	
Signature D-	lami	
(By a d	irector, president or other officer - if directors or officers have not been	
	d, by an incorporator - if in the hands of a receiver, trustee, or other court	
appoin	ted fiduciary by that fiduciary)	
	ISABEL E SOFIA PENA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	