# P11000095654

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## COVER LETTER

TO: Amendment Section Division of Corporations

# RAFENORGE GROUP CORP

DOCUMENT NUMBER: \_\_\_\_\_

NAME OF CORPORATION:

P11000095654

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cristian Giaculli

Name of Contact Person

G&G 7777 International Investments Corp

Firm/ Company

20200 W Dixie Hwy Ste 907

Address

Aventura, FL 33180

City/ State and Zip Code

gygj77@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

S43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327

<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee

	Articles of Amendment		
	to Articles of Incorporation of	· · · · · · · · · · · · · · · · · · ·	* }
	RAFENORGE GROUP CORP	2023 OCT - 3 PH	5: 25
(Name of Corpor:	ation as currently filed with the Florida I		
	P11000095654		. d.2. . F1
(Doc	cument Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Flor its Articles of Incorporation:	ida Statutes, this <i>Florida Profit Corporatio</i>	<i>m</i> adopts the following amendr	ment(s) t
A. If amending name, enter the new name of the	corporation:		
		The n	ew.
<ul> <li>B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u></li> <li>C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>)</li> </ul>	<u>DDRESS</u> )		-
D. <u>If amending the registered agent and/or regi</u> nnew registered agent and/or the new registered agent <u>Name of New Registered Agent</u>	stered office address in Florida, enter the ed office address:	e name of the	-
	(Florida street address)		
New Registered Office Address:	(Florida street address) (City)	Florida	_

Signature of New Registered Agent, if changing

**Check if applicable** The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

# · · · ·

# 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:

Example: <u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	V	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
(Check One)	Р	SUAREZ, RAMON G	20200 W Dixie Hwy 907
Add			Aventura, FL 33180
X Remove			
2) Change	VP	RUDIERO DE SUAREZ. NORMA A	20200 W Dixie Hwy 907
Add			Aventura, FL 33180
X Remove	S	SUAREZ, FERNANDO G	20200 W Dixie Hwy 907 Aventura, FL 33180
Add			
X Remove	CFO	SUAREZ, GERMAN D	20200 W Dixie Hwy 907
4) Change			Aventura, FL 33180
Add			
X Remove	Р	Suarez, German D	20200 W Dixie Hwy 907
5) Change X_ Add	<u>·</u>		Aventura, FL 33180
Remove	VP	Suarez, Fernando G	20200 W Dixie Hwy 907
6) Change Add			Aventura, FL 33180
Remove			

	lding additional Articl sheets, if necessary).	(Be specific)			
	<u> </u>	<u> </u>			
			<u> </u>		
				-	
					·
			,		
				<u> </u>	····
fan amendmen(	provid <u>es for an excha</u>	ange reclassificati	on or cancellation	of issued shares.	
provisions for in	nplementing the amen	dment if not conta	ained in the amend	lment itself:	
(if not applic	able, indicate N/A)				
			<b>_</b>	<u>.</u>	• <b></b>
			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
			<u> </u>		

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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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- S The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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

	······································
	(voting group)
	/ /
Dated	9/7/23
istated	
Signature	
(	(By a circulor 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)
	SUAREZ, RAMON G
	(Typed or printed name of person signing)
	President
	(Title of person signing)