## P110000091476

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Amend 10 8/8/12

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: GAROXY I	NC	
DOCUMENT NUMI	BER: P1100009747	6	
	of Amendment and fee are su		
Please return all corre	spondence concerning this man	tter to the following:	
, .	GABRIEL DAYAN	·	
	GAROXY INC	Name of Contact Person	
	5170 TENNIS RD	Firm/ Company	
	DELRAY BEACH	Address I, FL 33484	
		City/ State and Zip Code	:
ale	@florida-brokers.d		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
GABRIEL DAYAN		at (954	, 640-9111
Name of Contact Person		Area Coo	le & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 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)
Amo Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301



## Articles of Amendment to Articles of Incorporation of

GAROXY, INC,	V	
(Name of Corporation as currently filed wi	th the Florida Dept. of State)	
P11000097476		
(Document Number of Corpo	ration (if known)	<del></del>
Pursuant to the provisions of section 607.1006, Florida Statulits Articles of Incorporation:	tes, this <i>Florida Profit Corporation</i> ado	pts the following amendment(s) to
A. If amending name, enter the new name of the corpora	tion:	
		The new
name must be distinguishable and contain the word "con" "Corp.," "Inc.," or Co.," or the designation "Corp," "Incword "chartered," "professional association," or the abbrev	c," or "Co". A professional corporat	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS		
<u> </u>		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		_ <del></del>
		Marie de la companya
D. If amending the registered agent and/or registered off		e of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent		
(F	lorida street address)	
New Registered Office Address:	. Florida	
Hen Registered Office Heldress.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am f		of the position.
Signature of New Reg	ristered 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)

Example:

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>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	VP	AVILA, ROXANA E	2600 S.W. THIRD AVE., SUITE 800	
Add			MIAMI FL 33129	
X Remove				
2) Change	S	ACEVEDO, RAFAEL A SR	2600 S.W. THIRD AVE., SUITE 800	
Add			MIAMI FL 33129	
X Remove				
3) Change	Ţ	AVILA, ROXANA E	2600 S.W. THIRD AVE., SUITE 800	
Add			MIAMI FL 33129	
X Remove				
<del></del>				
4) Change				
Add			<del></del>	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u>,                                    </u>	
f an amendment provides for an exclusions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

he date of each amendment(s) adoption: 08/03/2012	
Offective date if applicable: 08/03/2012	
(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 08/03/2012	
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)	
GABRIEL DAYAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	