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trempremo

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: INTERNATIONA	L GROUP WARRANTY	INC			
DOCUMENT NUMBER: P12000007901						
The enclosed Article	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	OCTAVIO P ARAUJO					
		Name of Contact Person	n			
	INTERNATIONAL GROUP	WARRANTY INC				
		Firm/ Company				
	1292 SW 21 TERRACE					
Address						
CORAL GABLES, FL 33145						
		City/ State and Zip Cod	e			
INT	AMERI@HOTMAIL.COM		att			
	<u> </u>	sed for future annual report	notification)			
	E man address (to be a	sea to: tatare aimaai report	normountain)		のズ	,,
For further information	on concerning this matter, pleas	se call:		age or land	16 NOV 16 PH 4: (
	·····, p				9	Ţ
OCTAVIO P ARAU	JJO	at (219-3070	.19	7	; "
Name	of Contact Person	Area Co	ode & Daytime Telephone Nu	mber 🐍 :	Ę.	 \
Enclosed is a check t	for the following amount made	payable to the Florida Depa	artment of State:		0	
■ \$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)			
	ailing Address		Address			
An	nendment Section	Ameno	Iment Section			

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporati	ion as currently f	led with the Florida Dept. of State)	
0050000619				
(Docur	nent Number of C	orporation (if known)		
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	a Statutes, this Flo	rida Profit Corporation adopts the f	ollowing an	nendment
. If amending name, enter the new name of the co	orporation:			
			The	e new
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	o," "Inc," or "Co	". A professional corporation name	the abbre must cont	viation ain the
B. Enter new principal office address, if applicable Principal office address MUST BE A STREET ADD				
				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) Y)			
(maning damess MAT BE A TOST OF THEE BE	<u>/A</u>)	_		
				<u>の</u> 芸 一
			Kris Tara	
. If amending the registered agent and/or registe new registered agent and/or the new registered		s in Florida, enter the name of the		5 1
	office audi ess.		in.	PH
Name of New Registered Agent				*: O
	(Florida street	address)	***	
New Registered Office Address:	,	, Florida		

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P		ROBERTO RIBEIRO DA SILVA	1292 SW 21 TERRACE
X Add				CORAL GABLES, FL 33145
Remove				
2) Change	Р	_	OCTAVIO P ARAUJO	1292 SW 21 TERRACE
Add				CORAL GABLES, FL 33145
X Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				***
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add		_		
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
	<u>. </u>
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, and and an analysis in the amendment itself:

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)
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``
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.
11/11/2016
Dated
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)
ROBERTO RIBEIRO DA SILVA
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)