P12000096671

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GRAN	ID NATURAL	S CORI)	
DOCUMENT NUMBER: P120000	96671			
The enclosed Articles of Amendment and for		ing.		
Please return all correspondence concerning	g this matter to the follo	owing:		
MARIA DCE	0			
***	Name of C	ontact Persor		
GRAND NA	TURALS CO	RP		
	Firm/	Company		
1414 NW 1	07 AVE STE	115		
	Ac	dress		
DORAL FL	33172			
,	City/ State	and Zip Code	· .	
acostaesteveza	.cct@gmail.co	m		
	(to be used for future a		notification)	
For further information concerning this mat	ter, please call:			
MARIA DCEO		305_	592 5240	
Name of Contact Person	at(
Enclosed is a check for the following amount	nt made payable to the	Florida Depa	rtment of State:	
■ \$35 Filing Fee □\$43.75 Filing Certificate of		Copy al copy is	□\$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		Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

Articles of Amendment Articles of Incorporation

MF INTERNATIONELL CORP (Name of Corporation as currently filed with the Florida Dept. of State) P12000096671 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: GRAND NATURALS CORP name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: . Florida 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 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)

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: 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)	<u>Title</u>	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			,
3) Change			
Add			
Remove			
4) Change			
/ Add			
Remove			
5) Change			
5) Change			
Add			
Remove			
6) Change		_	
Add			
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	provides for an exch	<u>ıange, reclassifica</u>	tion, or cancellatio	on of issued shares,	
lf an amendment	plementing the ame	ndment if not con	<u>itained in the amer</u>	idment itself:	
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provisions for im	able. indicate N/A)				
provisions for im	able, indicate N/A)				-
provisions for im	able, indicate N/A)			<u> </u>	
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11/10/12				
The date of each amendment(s) adoption:				
Effective date if applicable:				
(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)				
(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 4 10 13				
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 tiduciary by that fiduciary)				
Naria Deed				
(Typed or printed name of person signing)				
President				
(Title of person signing)				