## P13600096944

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GRUPO MARINO	) MARCO ANTONIO COF	RP			
	BER: P13000086944					
The enclosed Article.	s of Amendment and fee are su	ibmitted for filing.				
Please return all corre	espondence concerning this ma	itter to the following:				
	LUIS EDUARDO MOLINO					
		Name of Contact Person	1			
	GRUPO MARINO MARCO ANTONIO CORP					
		Firm/ Company				
	251 JACARANDA DRIVE					
		Address				
	PLANTATION FL 33324					
		City/ State and Zip Code	<u>.                                    </u>			
For further information	on concerning this matter, pleas	sed for future annual report se call:  at ( +58414				
Name	of Contact Person	at ( Area Co	)			
	or the following amount made		·			
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)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address  ment Section on of Corporations  Building xecutive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

GRUPO MARINO MARCO ANTONIO CORP

(Name of Corporation as currently t	iled with the Florida Dept. of State)
P13000086944	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Flaits</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
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 new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	
(Florida street	address)
New Registered Office Address:(C	ity) , Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position 29 P

## 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> 171</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	T		ARMEN KEVORKIAN MORALES	251 JACARANDA DR
X				PLANTATION FL 33324
Remove				
2) Change		_		
Add				
Remove				
3 ) Change			<del></del>	
Add				
Remove				-
4) Change		_		
Add				
Remove				
5) Change				
Add		<u> </u>		
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
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<u> </u>		
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(y not appricame, marcate w.A.)		
		_
	-	
<u>-</u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more i	than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco	applicable statutory filing requirements, this date will not be listed as the rds.
Adoption of Amendment(s) (CHECK ONE	
■ The amendment(s) was/were adopted by the shareholders by the shareholders was/were sufficient for approval.	s. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholde must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) wa	as/were sufficient for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of direction was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporator action was not required.	s without shareholder action and shareholder
08/25/2017 Dated	
Signature Ju	
(By afflireetor, president or other	r officer – if directors or officers have not been f in the hands of a receiver, trustee, or other court ciary)
LUIS EDUARDO MOI	JNO
(Typed or pr	inted name of person signing)
PRESIDENT	
(	Title of person signing)