P1400016602

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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SECRETARY OF CHAIT DIVINION OF CHARBALIONS DIVINION OF CHARBALIONS

C. LEVAS JUL 3 0 2014 EXAMINER

COVER LETTER

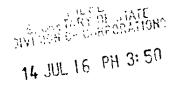
TO:	Amendment Section	
	Division of Corporation	S

Division of corporations		
NAME OF CORPORATION: Chateau DOCUMENT NUMBER: P140000160	1719 Corp. 602	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
Martin Lede		
One Global Pro	Name of Contact Person	
18305 Biscayn	Firm/ Company le Blvd. Suite	218
Aventura Florid	Address da 33160	
	City/ State and Zip Code	e
martinl@onegloba	alpm.com	
	sed for future annual report	notification)
For further information concerning this matter, please	se call:	
Martin Lede	_{at (} 786	,3644500
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	irtment of State:
\$35 Filing Fee \$\text{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	Amend Divisio	Address Iment Section on of Corporations

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment **Articles of Incorporation**



Chateau 1719 Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

P14000016602	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit</i> its Articles of Incorporation:	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." "company "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professor of chartered," "professional association," or the abbreviation "P.A." 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 in Florida new registered agent and/or the new registered office address: Name of New Registered Agent	, enter the name of the

New Registered Office Address:

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

(Florida street address)

(City)

__, 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)

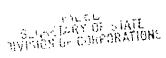
Please note the officer/director title by the first letter of the office title:

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.

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>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Nora Romano	18305 Biscayne Blvd
✓ ∧dd			Suite #218
Remove			Aventura, FL 33160
2) Change	D	Marcelo Wolff	1250 E Hallandale Beach
Add			Suite # 705
Remove			Hallandale Beach FL 33009
3) Change			
Add			
Remove			
4) Change			
∧dd			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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	· · · · · · · · · · · · · · · · · · ·
an amendment provides for an exchorovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:



date this document was signed.	14 JUL 16 PH 3: 50	, it other than the
Effective date if applicable: 6/3	0/2014	
Effective date ir applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 6/30/20	14	
Dated	1101	
Signature		
	irector president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ted finuciary by that fiduciary)	
	Nora Romano	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	

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