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# **COVER LETTER**

Division of Corpora	tions		
NAME OF CORPORA	TION: GRF	TRADE	USA, INC.
DOCUMENT NUMBE	R: ////	1000426	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	•
Please return all correspo	ondence concerning this ma	tter to the following:	
	JAMES	R. LAY	igne.
		Name of Contact Person	
A	menical La		Knowlind PLLC
·	780 Wet	Firm/ Company	Le ROAD, Suito 395
<u> </u>	300 Ves/	Address	the Motion, July 10
	Oplando.	F-1. 5	72819
-		City/ State and Zip Cod	
1	Vaviane	Colow in	kanonional.com
	E-mail address: (to be us	sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
JAMES	R. LA VIGNE	e at (417	316-9988
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment 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

# **Mailing Address**

TO: Amendment Section

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

# **Street Address**

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

is enclosed)

• •	Articles of Amendment	
· ·	to	Fligh
•	Articles of Incorporation	SPEACLANT OF A SAME DIVISEDS OF EOFFORAT WAS
$\alpha =$	91SA	DIA191 We do a control
しんとう	RADE, INC.	15 AUG 13 PM 2: 34
(Name of C	Corporation as currently filed with the Florida	Dept. of State)
$P_{i}$	140000 2 4265	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Corporat</i>	tion adopts the following amendment(s) to
A. If amending name, enter the new name	e of the corporation;	
		The new
word "chartered," "professional association  B. Enter new principal office address, if a (Principal office address MUST BE A STR	applicable: EET ADDRESS )	The state of the s
C. Enter new mailing address, if applical (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/o new registered agent and/or the new r	or registered office address in Florida, enter the registered office address:	e name of the
Name of New Registered Agent		

, Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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)

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 Jone	<u>es</u>			
X Add	<u>sv</u>	Sally Smi	<u>th</u>			
Type of Action (Check One)	Title		Name		Address	
1) Change	D, V.	<u>P</u>	KICAROL	Verzola	Rua Des, Sanpa	ie, Nac
Ada					Rua Des Sanpa Sala 202 CEP-20 Vitoria, ES-BO	1055-29 !4-51
2)Change	<del></del>	<del></del> -	LEONARD	lo Cipeinu	<u> </u>	
Add						
3 ) Change		<b>-</b>				
Add						
Remove						
4) Change						
Add Remove						
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5) Change Add						
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6) Change						
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Remove						

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•	
,	
f an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) a date this document was signed.	adoption:		15 AUG I	3 PH 2: 3 H other than the
Effective date if applicable:	Upon fi	ling		
	(no more the	an 90 digs after amer	ndment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the ap epartment of State's record	oplicable statutory fil s.	ing requirements, t	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. ufficient for approval.	The number of votes	cast for the amend	nent(s)
☐ The amendment(s) was/were ap must be separately provided for				
"The number of votes cast	t for the amendment(s) was/	were sufficient for ap	proval	
· by			***	
	(voting group)			
☐ The amendment(s) was/were addrection was not required. ☐ The amendment(s) was/were addrection				
action was not required.		/	_	
Dated	ugust 11	,2015		
Signature	Town the le			
	prector, president or other o	officer – if directors o	r officers have not	been
selecte	d, by an incorporator if in	n the hands of a receiv		
appoin	ited fiduciary by that fiducia	ary)		
	CRISTONO	RO de	Asis	Clem
	(Typed or print	ted name of person sig	gning)	
	Fresiden	t, Dia	ector	
	(Tit	tle of person signing)		