P15000003824

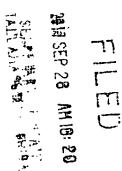
(Re	equestor's Name)	
(Ac	idress)	<u> </u>
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: EDUMAR GRANIT IN C DOCUMENT NUMBER: P15000003824				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
EDUARDO MARTINEZ Name of Contact Person EDUMAR GRANIT Firm/ Company 281 NW 144 ST Address MIAMI FL 33168 City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call: Eduardo Martinez at 186, 281-3136 Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed) S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Street Address Amendment 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

Edumak GRAI	oit Inc	
(Name of Corporati	ion as currently filed with the Florida Dept. of State)	-
P1500000382	24	
(Docum	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
	rd "corporation," "company," or "incorporated" or p," "Inc," or "Co". A professional corporation name pabbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADL</u>		
		. 123
		- T
C. Enter new mailing address, if applicable:	•	
(Mailing address MAY BE A POST OFFICE BO	<u></u>	22
		12 2
		
D. If amending the registered agent and/or register new registered agent and/or the new registered		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	. Florida	
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	vistered Agent:	
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the posi	tion.
Signe	nature 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	Va	P JACQUELINE G.MA	etiNez
X Add			281 NW14421
Remove			MAMI, P1 33/68
2) Change			
Add			
Remove		-	
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			

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

The date of each amendment(s) adoption: late this document was signed.	9/20/2017	, if other than the
Effective date if applicable:	9- 20 -/7 (no more than 90 days after amendment)	file date)
Note: If the date inserted in this block does in document's effective date on the Department of	not meet the applicable statutory filing request f State's records.	sirements, this date will not be listed as the
Adoption of Amendment(s) (CF	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	ne shareholders through voting groups. The group entitled to vote separately on the an	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by		
(vo	ning group)	
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action ar	nd shareholder
Dated 9-20-1 Signature Folly	<u> </u>	
(By a director, pres selected, by an inc	sident or other officer – if directors or office orporator – if in the hands of a receiver, trus y by that fiduciary)	stee, or other court
Ed	Vando Martinez-	President
	(Typed or printed name of person signing) HOSIALAT	
	(Title of person signing)	