P15000023691

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: GMB GRO	DUP (USA), INC.	•	
DOCUMENT NUMBER: P150000236			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
Rita N. Mule Sa	nchez		
	Name of Contact Person	1	
107 Harbour Po	Firm/ Company		
107 Harbour Po			
Greenacres, FL	Address . 33413		
	City/ State and Zip Cod	e	
mannyg3000@hotn	nail.com		
	used for future annual report	notification)	
For further information concerning this matter, ple	vase call:		
Manuel Guerrero	at (305	, 632-9126	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount mad-	e payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of



GMB GROUP (USA), INC

15 HAR 20 PM 1:21

GIVID GROUP (USA), INC.	() Imit as
(Name of Corporation as currently filed with the Fl	orida Dept. of State)
P15000023691	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Oword "chartered," "professional association," or the abbreviation "Inc."	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
• •	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1 477 1
(Trincipal office data ess most be ASTROLL ADDRESS)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>	
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
NI/Λ	<u>i</u>
Name of New Registered Agent N/A	
(Florida stre	et address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent—I am familiar w	un and accept the obligations of the position
	
Signature of New Registered A	gent, 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.

X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	ST	-	AURA POLIDOR ASCANIO	107 harbour Pointe Way
Add				Greenacres, FI 33413
Remove				
2) Change		_		
Add				
Remove				
3) Change				······································
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				THE PARTY TO SERVICE A SECTION AND ADDRESS.

E. If amending or adding additiona (Attach additional sheets, if necess	Articles, enter changery). (Be specific)	ge(s) here:		
N/A	A Jy			
<u> </u>				
 If an amendment provides for an provisions for implementing the 	exchange, reclassific	cation, or cancellatio	n of issued shares,	
(if not applicable, indicate N	(4)	mtamed in the amen	ument itsen;	
N/A				
			1 to	
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				· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) adoption: March 17, 2015 ડે ાતી : ગાર<u>ભાગ</u>, if other than the date this document was signed. 15 MAR 20 PM 1: 21 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 (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_March 17, 20 Signature (By a director, president or other officer - If directors of selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Rita N. Mule Sanchez (Typed or printed name of person signing) President (Title of person signing)