P15000073802

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: MIRAMAR GREA	AT HOUSE INC	
DOCUMENT NUMBER			
The enclosed Articles of A		bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
JOS	SE NICENBOIM		
١.		Name of Contact Persor	1
ZE	T GROUP CORP		
		Firm/ Company	
209	00 NE 30 AVE SUITE 20	00-27	
		Address	
AV	ENTURA, FL 33180		
		City/ State and Zip Code	e
JENICEN	IBOIM@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
JOSE NICENBOIM		at (305	9601197
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for the	e 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 is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio Clifton	Address ment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



MIRAMAR GREAT HOUSE INC

2016 OCT 25 PM 1: 20

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P15000073802	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	rporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADD</u>	RESS)
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BO</u>)	<u> </u>
D. If amending the registered agent and/or registere	and affine address in Florida, output he name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
Towns of New Negative Angels	**************************************
	(Florida street address)
N. D 1000 411	,
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Regi	
nerevy accept the appointment as registered agent. I	I am familiar with and accept the obligations of the position.
Signa	ature 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.

X Change	PT	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	P	_	MIRANDA, MARTHA G	20900 NE 30 AVE #200
Add				AVENTURA, FL 33180
X Remove				
2) Change	P		US Business Management LLC	20900 NE 30 Ave #200
X Add				
Remove				
3)Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	<u> </u>			
Add				
Remove				
O Characa				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·

	•
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:
	Manager Control of the Control of th

The date of each amendment(s) adoption.	, if other than the
date this document was signed.	. سي. محموله و هر
Effective date <u>if applicable</u> : 10-20-20 (no more	216 STEELE TAGTON
(no mor	e than 90 days after amendment file date) 2016 OCT 25 PH 1:20
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's red	e applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	E)
The amendment(s) was/were adopted by the shareholded by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehole must be separately provided for each voting group entitle.	
"The number of votes cast for the amendment(s)	was/were sufficient for approval
by	"
(voting group	<u>,</u>
 □ The amendment(s) was/were adopted by the board of daction was not required. □ The amendment(s) was/were adopted by the incorporate 	
action was not required.	ors without shareholder action and shareholder
October 19th, 2016 Dated	
	her officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court duciary)
Martha Miranda	
(Typed or	printed name of person signing)
P	
	(Title of person signing)