P15000/01920

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MAR 2 1 2016 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: UNION 3 GROUP	CORP	
DOCUMENT NUM	BER: P15000101920		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	REGINA MEDEIROS	,	
		Name of Contact Person	l .
	CSG - CAPITAL SERVICES	GROUP INC	
		Firm/ Company	
	446 W HILLSBORO BLVD		
		Address	
	DEERFIELD BEACH, FL 33	3441	
		City/ State and Zip Code	
PAU	LO@GRUPOORNELA.COM	.BR	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
REGINA MEDEIRO	S	at (427-4770
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:
☐ \$35 Filing Fee	S43.75 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

UNION 3 GROUP CORP

	as currently filed with the Florida Dept. of State)	
P15000101920		
(Documen	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following ame	endment(s) to
A. If amending name, enter the new name of the corp	poration:	
"Corp.," "Inc.," or Co.," or the designation "Corp,"	"corporation," "company," or "incorporated" or the abbrev "Inc," or "Co". A professional corporation name must conta	
word "chartered," "professional association," or the ab	bbreviation "P.A."	
B. Enter new principal office address, if applicable:		AR
(Principal office address <u>MUST BE A STREET ADDR</u>	ESS)	
) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	<u> </u>
	- 11 	PH PH
	9	<u>₹</u>
C. Enter new mailing address, if applicable:		52 52
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u>. </u>
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regist		
I hereby accept the appointment as registered agent. I a	am familiar with and accept the obligations of the position.	
C.	ure 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	<u>PT</u>	John Doc	
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	S	CARLOS JOSE R PITTA	405 NW 12TH AVE
Add			MIAMI, FL 33128
X Remove			
2) Change	s	ORNELA INTERNATIONAL LLC	405 NW 12TH AVE
Add			MIAMI, FL 33128
X Remove			
3) Change	S	PLANO 6 PRODUCTIONS, INC.	405 NW 12TH AVE
Add			MIAMI, FL 33128
X Remove			
4) Change	<u>s</u>	MIRACOLI INVESTMENTS, LLC	405 NW 12TH AVE
Add			MIAMI, FL 33128
X Remove			
5) Change			
Add		<i>(</i>	
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
,		
f an amendment provides for an excl	change, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
(y not applicable, mateure 1971)		
	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·	
	,	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Title of the terminal transfer of the terminal	
Effective date <u>if applicable</u> : (no more than 90 days after amenda	ment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes can by the shareholders was/were sufficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. must be separately provided for each voting group entitled to vote separately on the separately on the separately of the separat	
"The number of votes cast for the amendment(s) was/were sufficient for appr	roval
by	.,,
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder act action was not required.	ion and shareholder
03/10/2016	
Signature Vaulo Juniler	
(By a director, president or other officer – if directors or selected, by an incorporator – if in the hands of a receive appointed fiduciary by that fiduciary)	
PAULO S ORNELA	
(Typed or printed name of person sign	ning)
PRESIDENT	
(Title of person signing)	