P16800054173

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALLIANCE GTI	B INC.
DOCUMENT NUMBER: P16000054173	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
PAULO HENRIQUE FRA	NCEZ
	Name of Contact Person
ALLIANCE GTB INC.	
	Firm/ Company
333, SE 2ND AVE SUITE	2015
	Address
MIAMI -FL 33131	
	City/ State and Zip Code
paulofrancez@uol.com.br	
-	used for future annual report notification)
`	•
For further information concerning this matter, ple	ease call:
PAULO HENRIQUE FRANCEZ	at (305) 613-9715
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	
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

ALLIANCE GIB INC.			
(Name of Corporation	on as currently filed with the Florida D	ept. of State)	
P16000054173			
(Docum	nent Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation	n adopts the following amendment	t(s) t
A. If amending name, enter the new name of the co	orporation:	•	
		The new	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	" "Inc," or "Co". A professional corp	orporated" or the abbreviation	
B. Enter new principal office address, if applicable			٠. ع
(Principal office address MUST BE A STREET ADD			<u>``</u>
	49-2-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		<i>=</i>
		<u> </u>	
C. Enter new mailing address, if applicable:		T9 3	r K
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	a	
		- ZA+	-

D. If amending the registered agent and/or register	red office address in Florida, enter the	name of the	
new registered agent and/or the new registered			
Name of New Registered Agent			
	(Florida street address)	<u>,</u>	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	ristered Agent: I am familiar with and accept the obliga	tions of the position.	
Sian	ature of New Registered Agent if changi	no	

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)

Example:

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 Doe	
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) X Change	p	PAULO HENRIQUE FRANCEZ	RUA GENERAL MENA
Add			BARRETO, 343 SAO PAULO-SF
Remove			01433-010 BR
2) Change			
Add			
Remove			·
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damova			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
. 25	
-	<u> </u>
^*	
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If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

	06/22/2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(sufficient for approval.)
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were ade action was not required.	opted by the board of directors without shareholder action and shareholde	г
The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
07/13/2010	5	
Dated		
A Signature	antin	
(Bva)	lirector, president or other officer - if directors or officers have not been	
	d by an incorporator - if in the hands of a receiver, trustee, or other cour	t
appoir	ited fiduciary by that fiduciary)	
	PAULO HENRIQUE FRANCEZ	,
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	