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SECRETARY OF STATE

FEB 2 4 2016



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	S CORP			
DOCUMENT NUM	BER: P16000059324		·		
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	MARIA FERSACA				
		Name of Contact Person	n		
	MFF & ASSOCIATES LLC				
		Firm/ Company			
	55 SE 6TH STREET STE 15	, ,			
	Address				
	MIAMI, FL 33131				
		City/ State and Zip Cod	e		
ADM	IIN@MFFASSOCIATES.CO	M			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:at (786	842-0071		
Name	of Contact Person		de & Daytime Telephone Number		
	or the following amount made		•		
■ \$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 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

GVHB HOLDINGS CORP				
(<u>Name</u>	of Corporation as currently f	iled with the Florida Dept	t. of State)	
P16000059324				
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	orida Profit Corporation ac	lopts the followin	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	". A professional corpora		
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appli (Mailing address MAY BE A POST				
				
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the nan	ne of the	
	MFF & ASSOCIATES LLC			
Name of New Registered Agent	55 SE 6TH STREET STE 15	06		-
	(Florida street	address)		=
New Registered Office Address:	MIAMI		, Florida	
	(Ci	ity)	(Zip (Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		h and accept the obligation.	s of the position.	
		Walte	AS 2	
	Signature of New Reg	gered Agent, If changing	II FE	- - 11

Page 1 of 4

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>	<u>Name</u>	<u>Addres</u> s
1) x Change	D	GABRIELLA HERRERA	8363 LAKE DRIVE #H-401
Add			DORAL, FL 33166
Remove			
2) Change	D	JUAN V. HERRERA	8363 LAKE DRIVE #H-401
X Add			DORAL, FL 33166
Remove	D	JUAN D. HERRERA	8363 LAKE DRIVE #H-401
3) Change			DORAL, FL 33166
X Add			DORAL, PL 33100
Remove			
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	* ***
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) ad date this document was signed.	0//14/2016 loption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this opartment of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmen fficient for approval.	l(s)
	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	nent
	for the amendment(s) was/were sufficient for approval	
by	.,,	
·	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	der
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
12/31/2016		
DatedSignature	Habriella Herrera	
(By a di	irector 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 conted fiduciary by that fiduciary)	ип
	GABRIELLA HERRERA	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	