## P16000093335

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## COVERLETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	GRUPO CUBARO	GE, INC.	
DOCUMENT NUMBER:	P16000093335		
The enclosed Articles of Amend	ment and fee are su	abmitted for filing.	
Please return all correspondence	concerning this ma	itter to the following:	
		CLAUDIA CORNET	
	<del>.</del>	Name of Contact Person	1
	CC FI	NANCIAL & ACCOUNTI	NG, INC.
	Firm/ Company		
	1117 NE 163RD STREET STE E		
<del></del>	Address		
	NORTH MIAMI BEACH FL 33162		
		City/ State and Zip Cod	e
	INFO@0	CCFINANCIALACCOUN	TING.COM
E-ma		sed for future annual report	
For further information concerning	ng this matter, pleas		
CLAUDIA CORNET		at (	
Name of Contact	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	ving amount made	payable to the Florida Depa	irtment of State;
	3.75 Filing Fee & tificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addre Amendment Se Division of Co P.O. Box 6327 Tallahassee, FI	rporations	Amend Divisio Clitton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

## Articles of Amendment to Articles of Incorporation of

GRUPO CUBARGE, INC

## (Name of Corporation as currently filed with the Florida Dept. of State)

P16000093335

(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607,1006. Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation	adopts the following amendment	
A. If amending name, enter the new name of the corporation:			
N/A		The new	
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpo	porated" or the abbreviation	
B. Enter new principal office address, if applicable:	1117 NE 163RD STREET STE E		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NORTH MIAMI BEACH FL 33162		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1117 NE 163RD STREET STE E		
	NORTH MIAMI BEAC	H FL 33162	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address Name of New Registered Agent  (Florida:		ame of the	
	saver adavess)		
New Registered Office Address:	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.  Signature of New	nt: r with and accept the obligation 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	MAURICIO CORREDOR	1000 5TH ST STE 200
Add			MIAMI BEACH FL 33139
X Remove			
2) Change	D	EDWARD J. DEANE	1630 NORTH OCEAN BLVD
X Add			POMPANO BEACH FL 33062
Remove			
3 ) Change	· · · - · ·		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter (Attach additional sheets, if necessary). (Be spec	cific)		
N/A			
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. If an amendment provides for an exchange, rec	lassification, or cancella	ation of issued shares,	
provisions for implementing the amendment if	f not contained in the an	nendment itself:	
(if not applicable, indicate N/A)			
N/A			
	· · · · · · · · · · · · · · · · · · ·		

	OCTOBER 18, 2017	i Carola and Alexander of the
The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes east for the amendmentificient for approval.	ent(s)
	oproved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	tement
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareh	older
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholde	r
10/18/20	17	
Dated	<del></del>	
Signature	11:24)	
(B) 1	director, resident or other officer - if directors or officers have not b	
	ed, by all incorporator – if in the hands of a receiver, trustee, or other need fiduciary by that fiduciary)	court
my jon	• •	
	LUIS R ESTEVEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	