Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000188468 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another unver sheet.

To:

Division of Corporations

: 18501617-6380

Fran:

Armount, Name : PEDRO LUZQUINOS

ACCOUNT Number: : 120170000042 Chone

: (954) 655-8414

Fax Number

: 1954) 437-0007

\*\*Enter the emoil additions for this business entity to be used for future annual report mailings. Zhier only one emoil andross please.\*\*

Enest Address: Plutquinoif Chotmail. Com

#### COR AMND/RESTATE/CORRECT OR O/D RESIGN **BLANCO FIORETTI GROUP INC**

Certificate of Status	<u> </u>
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 2 0 2017

T. EMIEUX

### 1 >> 850-617-6381 HI7-000 1800 1007



#### **COVER LETTER**

TO: Amendment Section Division of Corporations

	,		
NAME OF CORPORA	ATION: BLANCO FIORET	TI GROUP INC	
DOCUMENT NUMBI	ER:		
The enclosed Articles of	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
ī	FRANCESCO F FIORETTI		
-		Name of Contact Person	1
_		Firm/ Company	
•	7903 NW 111 CT		
_		Address	
i	DÖRAL, FL 33178		
-		City/ State and Zip Cod	c
<b></b>	and a contact to the	.,	
PLUZ	QUINOSF@HOTMAIL.CO.		
	E-mail address: (to be us	ed for future annual report	nonneationy
For further information	concerning this matter, pleas	se call:	
PEDRO LUZQUINOS	;	at (	de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fce	☐\$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)
	ing Address		Address
	ndment Section		dment Section
	sion of Corporations Box 6327		on of Corporations  a Building
	hassee, FL 32314		Executive Center Circle
, 5			assee, FL 32301

## 1 >> 850-617-6381 H17000188468メ

Articles of Amendment to Articles of Incorporation of

BLANCO FIORETTI GROUP INC		
(Name of Corp	oration as currently filed with the Florida Dept	t. of State)
P17000019963		
([	Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Fits Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation ac	dopts the following amendment(s) t
A. If amending name, enter the new name of	the corporation:	_
name must be distinguishable and contain the "Corp" "Inc.," or Co.," or the designation "word "chartered," "professional association," of	e word "corporation," "company," or "incorpor "Corp," "Inc," or "Co". A professional corpora or the abbreviation "P.A."	The new prated" or the abbreviation attention the attention attention the
B. Enter new principal office address, if apple (Principal office address MUST BE A STREET		<del>_</del>
(17 mapa. office address in 1981 DE It Street		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFIC	EE BOX)	<u> </u>
		<del></del>
D. If amending the registered agent and/or re	egistered office address in Florida, enter the nar	me of the
new registered agent and/or the new regis	tered office address:	
Name of New Registered Agent		
		<u> </u>
	(Floridu street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
	(4.09)	(Lip) Comy
New Registered Agent's Signature, if changin I hereby accept the appointment as registered as	ng Registered Agent: gent. I um familiar with and accept the obligation	ns of the position.
	The state of the s	
	Signature of New Registered Agent, if changing	ARY.
		19 P
		A CONTRACTOR
		# # # # # # # # # # # # # # # # # # #
	Page 1 of 4	<b>P</b> 00

H170001884683

Example:

# 1 >> 850-617-6381

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 = Chairmon 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	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	GIOVANNA LANDOLI DE PIORETTI	7903 NW 111 CT
X Add			DORAL, FL 33178
Remove			
2) Change			
Add			
Remove			
3) Change			<del></del> -
^dd			
Rcmove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kentere			
6) Change	-		
Add			
Remove			

## 1 >> 850-617-6381 H17-0001884683

(Attach additional sheets, if necessary). (Be specific)  NEW OFFICER FULL NAME.	
Title VP	
GIOVANNA LANDOLI DE FIORETTI	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	

	07/18/2017	
The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
07/1	8//2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file duse)	
Note: If the date inserted in this bedocument's effective date on the De	clock does not meet the applicable statutory filing requirements, this date we partment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) efficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
07/18/2017 Dat <b>e</b> d	,	
Signature	namuses + Fiaretti	
selecte	irrector, 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 court ted fiduciary by that fiduciary)	
	FRANCESCO F FIORETTI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

Page 4 of 4