P176565153

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: THE GRAND CA	FE S I CORP	
DOCUMENT NUM	1BER: P17000051153		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	CONRADO M. PERALTA		
		Name of Contact Persor	1
	THE GRAND CAFE S I CO	RP	
		Firm/ Company	
	2701 GRIFFIN ROAD	Time Company	
		Address	
	FORT LAUDERDALE FL 3	3312	
		City/ State and Zip Code	>
thes	grandsicorp@gmail.com		
		sed for future annual report	notification)
		·	
For further informat	ion concerning this matter, pleas	se call:	
conrado m. peralta		954 at (962 2226 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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)
Ai Di P.	ailing Address mendment Section ivision of Corporations O. Box 6327 illahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation of

FILED

THE GRAND CAFE S I CORP

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(Name of Corporation as current)	v filed with the Florida Dept. of State) in
P17000051153	ALLAMASSI (1114-19)
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
MIA	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or " word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	AM
тисци бурс иштем <u>21031 по д 31кога должиза</u>)	
C. Enter new mailing address, if applicable:	\ 0
(Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered office addr	race in Florida, antar the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Office Address:	, Florida(City) (Zip Code)
Registered Agent's Signature, if changing Registered Agent weekly accept the appointment as registered agent. I am familiar weekly	
111	
	legistered 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	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	CONRADO M. PERALTA	2701 GRIFFIN ROAD
Add			FORT LAUDERDALE FL 33312
Remove			
2) X Change	VP	ALEJANDRO SCOLNIK	9700 COLLINS AVE, STE 243
Add			BAL HARBOUR FL 33154
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if r	itional Articles, enter chai iecessary). (Be specific)				
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e	£	T	lation of bearing	. h	
provisions for implement	for an exchange, reclassifing the amendment if not o	contained in the a	imendment itsel	<u>snares.</u> f:	
(if not applicable, indi	cate N/A)				
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	4/14	(1 1 1 1 1 1 1 1 1 1 			
	MIH				
	1				

	November 3, 2017	ic i de
The date of each amendment(s) a date this document was signed.	doption:	, 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 document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	I not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were adaction was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder November 3/2017	
Dated Signature		
(By a select	director-president or other officer – if directors or officers have not been ed. by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	Conrado M. Peralta	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	