## P180000035 796

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2019 JUL 12 PH 4: 13

Amend

JUL 2 9 2019 I ALBRITTON

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ORO BIANCO AS	SETS MANAGEMENT, I	NC	
DOCUMENT NUMBE	P18000035796			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this mat	ter to the following:		
(	CELIO EGIDO NUNES			
_		Name of Contact Person	1	
(	ORO BIANCO ASSETS MANAGEMENT, INC			
•••		Firm/ Company		
Ī	PO BOX 6880	Time Company		
_	<u> </u>	Address		
ı	DELRAY BEACH, FL 3348	2		
_		City/ State and Zip Code	2	
INFO(	agstolley.com			
		sed for future annual report	notification)	
For further information CELIO EGIDO NUNF	concerning this matter, pleas			
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number	
	the following amount made		·	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Cliftor 2661 F	Address  Iment Section on of Corporations I Building Executive Center Circle assee, FL 32301	

## Articles of Amendment

	10
	Articles of Incorporation
	of
ORO BIANCO ASSETS MANAGEMENT, INC.	

	Articles of A	
	Articles of In-	
ORO BIANCO ASSETS MANAGEMEN		
		tly filed with the Florida Dept. of State)
P18000035796	Corporation as corres	77/
	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ne of the corporation:	
name must be distinguishable and conto	in the word "corporation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
"Corp.," "Inc., or Co., or the designo word "chartered," "professional associat	ition Corp, inc. or ion," or the abbreviation	"P.A."
D. Enter now principal office address i	f applicable:	3296 LAKEVIEW BLVD
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		DELRAY BEACH, FL 33445
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO BOX 6880
		DELRAY BEACH, FL 33482
D. If amending the registered agent and new registered agent and/or the new	d/or registered office address	dress in Florida, enter the name of the
	TOLLEY HOLDINGS	
Name of New Registered Agent	<del></del>	
	3296 LAKEVIEW BLV	D
	3296 LAKEVIEW BLVI	D street address)
New Registered Office Address:		

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:

 $P = President; \ F = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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: XChange	<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) Change	S	PAULO CASSEB	1950 NW 93 AVE
Add			DORAL, FL 33172
X Remove			
2) Change			
Add			
Remove			
3) Change			<del>-</del>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)  NEW ADDRESS:
CELIO EGIDO NUNES
PO BOX 6880
DELRAY BEACH, FL 33482
C. 16
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)

The date of each amendment(s) adoption:	07/16/2019	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, tate's records.	this date will not be listed as the
Adoption of Amendment(s) (CHE	<u>CK ONE</u> )	
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app	nareholders. The number of votes cast for the amend proval.	ment(s)
	shareholders through voting groups. The following s croup entitled to vote separately on the amendment(s	
"The number of votes cast for the amend	ment(s) was/were sufficient for approval	
by(votin		
(votin	ng group)	
action was not required.	oard of directors without shareholder action and shareholder action and shareholder action and shareholder	
·		
07/16/2019 Dated Signature		
(By a director, presid	lent or other officer – if directors or officers have no porator – if in the hands of a receiver, trustee, or oth by that fiduciary)	
CELIO EGII	DO NUNES	
(1	Typed or printed name of person signing)	
PRESIDENT	r	
	(Title of person signing)	