P18000043824

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: CAPITAL MANA	GEMENT SERVICES GI	ROUP INC.	
DOCUMENT NUM	BER: P18000043824			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	IGOR RASCHKOVSKY			
	Name of Contact Person			
	CAPITAL MANAGEMENT SERVICES GROUP INC.			
	Firm/ Company			
	409 W. HALLANDALE BEACH BEVD. SUITE 208			
	Address			
	HALLANDALE, FL 33309			
	City/ State and Zip Code			
	igor.raschkovsky@grafenoinvestments.com			
	E-mail address: (to be us	sed for future annual repor	t notification)	
For further informatio	n concerning this matter, pleas	se call:		
Ana Victoria Campos	:	at (9612907	
Name of Contact Person		Area Co	ode & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	partment of State:	
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.O	ching Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amen Divisi The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation

CAPITAL MANAGEMENT SERVICES GROUP INC.

(Name of Corporation as curren	tly filed with the Flori	da Dept. of State)	·
P18000043824			
(Document Number	of Corporation (if know	vn)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corpo	ration adopts the following amer	ndment(s) to
A. If amending name, enter the new name of the corporation:			
N/A		The	new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corpor	orated" or the abbreviation "Co.	rp., ''
D. D	N/A		الماسة
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			(120CD)
,			<u></u>
		<u>, p</u>	₹ ₹(
	·	10: 47	الريا
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	: <u> </u>	
(Maning address MAT DEM FORT OF THEE HON)		7.5	
			_
			_
D. If amending the registered agent and/or registered office ad	dress in Florida, enter	the name of the	
new registered agent and/or the new registered office addre		the name of the	
Name of New Registered Agent N/A			
Name of New Registered Agent			
Window (Window)	street address)		
(Florida S	sirvei adaress)		
New Registered Office Address:	(6)	, Florida	
	(Ciţy)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agen	nt:		
I hereby accept the appointment as registered agent. I am familia		oligations of the position.	
Signature of Venu	Registered Agent, if ch		
Signature of New	Acgistereu Agent, ij en	ungmg	
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.		

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)

Example:

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 Doc 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> <u>Jo</u>	ohn Doe		
X Remove	<u>V</u> <u>M</u>	Mike Jones		
_X Add	<u>SV</u> <u>S</u>	ally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	PSTD	GRAFENO INTERNATIONAL	IFZA BUSINESS PARK	
X Add		INVESTMENTS - FZCO	DUBAI SILICON OASIS	
Remove			DUBAI- UNITED ARAB EMIRA	
2) Change	PSTD	IGOR RASCHKOVSKY	409 W. HALLANDALE BEACH	
Add			BLVD, SUITE 208	
X Remove 3) Change			HALLANDALE, FL 33309	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove			 _	
6) Change				
Add				
Remove				

/A	additional sheets, if necessar	y). (Be specific)			
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II an am	nendment provides for an e ions for implementing the a	exchange, reclassifica	tion, or cancellation	l of issued shares,	
if i	not applicable, indicate N/A)	tamed in the amen	and it itself.	
/A	••				
, , ,				-	

The date of each amendment(s) adoption date this document was signed.	n:	, if other than
Effective date if applicable:		
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirement of State's records.	its, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the an t for approval.	nendment(s)
	by the shareholders through voting groups. The following group entitled to vote separately on the amendme	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
by	(voting group)	
	(roung group)	
05/22/2024 Dated		
Signature	Igor Raschkonsky - GRAFENO FELO	
(By a director, selected, by an	president or other officer – if directors or officers have a incorporator – if in the hands of a receiver, trustee, or aciary by that fiduciary)	
IGOR	RASCHKOVSKY	
	(Typed or printed name of person signing)	
PSTD		
	(Title of person signing)	

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