P18000055359

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: KB HOLDINGS (GROUP INC	
DOCUMENT NUMI	BER: P18000055359		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	ANA PAULA SANTIAGO		
		Name of Contact Person	n
	KB HOLDINGS GROUP IN	IC	
		Firm/ Company	
	848 BRICKELL AVENUE S	SUITE 410	
		Address	
	MIAMI, FL 33131		
		City/ State and Zip Cod	e
ANA	@GRYPHUS.US		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
ANA PAULA SANT	IAGO	at (275 - 5414
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$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)
	ling Address		Address Iment Section
Division of Corporations			on of Corporations
	Box 6327		Building
Lall	ahassee, FL 32314	Z66 L E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

KB HOLDINGS GROUP INC.

(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P18000055359	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation	<u>:</u>
	The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," o word "chartered," "professional association," or the abbreviation	or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	3 3 7
(Mailing address MAY BE A POST OFFICE BOX)	
	3.
). If amending the registered agent and/or registered office a	
new registered agent and/or the new registered office add	ress:
Name of New Registered Agent	
(Floride	a street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am famili	
Tum jumin	чин чим чесери не отнучнот ој те розион.
Signature of Ne	w 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>	<u>John Doe</u>		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Tîtle</u>	<u>Na</u>	<u>ame</u>	<u>Addres</u> s
I) Change	D		rthur C. de Menezes Soares Filho	848 Brickell Ave. Ste 410
Add X Remove				Miami, FL 33131
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				_
4) Change				
Add				
Remove				
5) Change		- -		
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>If amending or adding additional Articles, enter change(s) here</u> : (Attach additional sheets, if necessary). (Be specific)
Please remove director Arthur Cesar de Menezes Soares Filho.
, <u>, , , , , , , , , , , , , , , , , , </u>
· · · · · · · · · · · · · · · · · · ·
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)

	12/13/18	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
l Effective date <u>if applicable</u> :	2/13/18	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	1
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	idopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	idopted by the incorporators without shareholder action and shareholder	
12/13/18 Dated		
Signature	actions	
(By/	director, president or other officer – if directors or officers have not been yed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Ana Santiago	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	