## P180000 59433

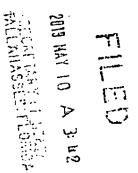
(Re	equestor's Name)	,
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone #	()
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	·)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	





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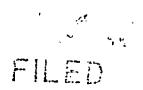
MAY 2 2 COTO T. LETIMEUX

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GMV CAPITAL G	ROUP INC	
DOCUMENT NUMB	ER: P18000059433		
	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	ROBERTO VILLANI		
	<del></del>	Name of Contact Persor	<del></del> 1
	GMV CAPITAL GROUP IN	C	
•		Firm/ Company	
	4800 NW 116TH CT		
•	•	Address	
	DORAL FL 33178		
•		City/ State and Zip Code	
robert	ovillanibrito@gmail.com		
	-	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Roberto Villani		786 at (	566-0754
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p		
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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



GMV CAPITAL GROUPING

(Name of Corporation	ion as currently filed with the Florida DerivorState 0 A 3: 12
P18000059433	GEOGRA TARM OF CORRE
(Docun	nent Number of Corporation (if known) JALLAHASSEE, ELORIDA
Pursuant to the provisions of section 607,1006, Floridates Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:
	The new
	ed "corporation," "company," or "incorporated" or the abbreviation of "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
3. Enter new principal office address, if applicable	
Principal office address <u>MUST BE A STREET ADL</u>	DRESS )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	)X)
	<del></del>
	<del></del>
<ol> <li>If amending the registered agent and/or register new registered agent and/or the new registered</li> </ol>	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
-	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg	
hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sien	nature of New 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.

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)	Title	<u>Name</u>	<u>Addres</u> s
I) Change	Р	CLAUDIANNA RIVERO	4800 NW 116 CT
Add			DORAL, FL 33178
X Remove			
2) Change	Р	ROBERTO VILLANI	4800 NW 116 CT
X Add			DORAL, FL 33178
Remove			
3 ) Change		<u> </u>	<del> </del>
Add			<del></del>
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	-		
Remove			

Attach additional sheets, if necessary).	(Be specific)			
				<del> </del>
···				
<u> </u>				<u></u>
				<del></del>
<del> </del>				<del>_</del> .
_				<del>-</del>
f an amendment provides for an exc	hange, reclassification	, or cancellation of	issued shares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not contain	<u>ied in the amendme</u>	nt itself:	
			<del></del>	
		. <u> </u>		
		<del></del>		

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
meetive unte <u>ir applicative</u> .	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this expartment of State's records.	late will 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 amendmen ufficient for approval.	us)
	proved by the shareholders through voting groups. The following states reach voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	opted by the board of directors without shareholder action and sharehol	der
The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	CRESTONES P	
select	director, president or other officer – if directors or officers have not bee ed. by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	ROBERTO VILLANI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>