P20000000011108

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
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| |

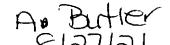
Office Use Only



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08/17/21--01009--011 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

| NAME OF CORPO | RATION: GMB RE INVEST | MENTS INC | |
|---|---|--|---|
| DOCUMENT NUM | BER: | | |
| | of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | espondence concerning this ma | tter to the following: | |
| | Claudio Benedetti | | |
| | | Name of Contact Person | 1 |
| | | Firm/ Company | |
| | 1680 Michigan Ave Ste 910 | | |
| | | Address | |
| | Miami Beach, FL 33139 | | |
| | | City/ State and Zip Code | 2 |
| | cla.benedetti@gmail.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further information | on concerning this matter, pleas | se call: | |
| Claudio Benedetti | | at (<u>305</u> | 672 4971 |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | artment of State: |
| ☐ \$35 Filing Fee | ■\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 | | Ameno Divisio The C | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 |

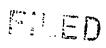
Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

 \mathbf{of}



| GMB RE INVESTMENTS INC | | 2021 AUG 17 DH 0 |
|--|---|--|
| (Name of Corporation as | currently filed with the Florida | |
| P20000021108 | | STORET OF STATE |
| (Document) | Number of Corporation (if known) |) WELAW LOCE, FIL |
| Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation: | utes, this <i>Florida Profit Corporat</i> | ion adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corpor | ration: | |
| DARTMILANO INC | | The new |
| name must be distinguishable and contain the word "corpor" Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation | "Co". A professional corporat | ated" or the abbreviation "Corp" |
| B. Enter new principal office address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRES | <u>SS</u>) | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | / | |
| | | |
| | | |
| D. If amending the registered agent and/or registered o | ffice address in Florida, enter the | he name of the |
| new registered agent and/or the new registered office | e address: | |
| Name of New Registered Agent | | |
| | | |
| | Florida street address) | |
| New Registered Office Address: | | . Florida |
| | (City) | (Zip Code) |
| | | |
| | • | |
| New Registered Agent's Signature, if changing Register Thereby accept the appointment as registered agent. I am | ed Agent: familiar with and accept the obli- | gations of the position. |
| | , , | · · · |
| | | |
| / | . ·· | |
| Signature | of New Registered Agent, if chan | ging |
| Check if applicable | | |
| ☐ The amendment(s) is 'are being filed pursuant to s. 607.0 |)120 (11) (e), F.S. | |
| | | |

| address of each Officer | and/or [| irector being added: | ie of each officer/direc | ctor being removed and title, name, a | nd |
|--|-----------------------|--|--|---|-------------|
| (Attach additional sheets | | sary) e by the first letter of the office title | | | |
| rvease note the ojjiceria. P = President: V= Vice | rector tu Presiden | t: T= Treasurer: S= Secretary: D= | = Director: TR= Truste | ee: C = Chairman or Clerk: CEG = Cl | nef. |
| Executive Officer; CFO | = Chief F | inancial Officer. If an officer/direct | or holds more than one | title, list the first letter of each office he | dd. |
| President, Treasurer, Di | | | | | |
| Changes should be noted | l in the fo | llowing manner, Currently John D | oe is listed as the PST So V and S. Thaca choic | and Mike Jones is listed as the V. Therd Id he noted as John Doc. PT as a Chan | 2 IS 100 |
| a change, while somes te. Mike Jones, V as Remov | | | ic + time is, These sinne | na ise named as somme boye, i i has a commi | χ |
| Example: | | • | | | |
| X Change | <u>b.t.</u> | John Doe | | | |
| X Remove | <u>V</u> | Mike Jones | | | |
| X Add | \underline{SV} | Sally Smith | | | |
| Type of Action | Title | <u>Name</u> | Á | ddress | |
| (Check One) | | | | | |
| 1) Change | | | / – | | |
| Add | | | | | |
| Remove | | | _ | | |
| 2) Change | | <i>/</i> | | | |
| Add | | | | | |
| Remove | | | | | |
| 3) Change | | - / | | , | |
| Add | | | _ | | |
| Remove | | | | | |
| 4) Change | | - / | | | |
| Add | | | _ | | |
| Remove | / | / | | | |
| 5) Change | + | | | | |
| Add | | | _ | | |
| Remove | | | _ | | |
| 6) Change | | | | | |
| iydd | | | _ | | |
| Remove | | | _ | | |

| amending or adding additional Articles, enter change(s) tach additional sheets, if necessary). (Be specific) | |
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| | |
| an amendment provides for an exchange, reclassification | , or cancellation of issued shares, |
| rovisions for implementing the amendment if not contain | ed in the amendment itself: |
| | . |
| (if not applicable, indicate N/A) | |
| rovisions for implementing the amendment if not contain (if not applicable, indicate N/A) | |
| (if not applicable, indicate N/A) | |
| (if not applicable, indicate N/A) | |

| | | 08/12/2021 | |
|-----------------|---|---|--|
| | ich amendment(s) ad | option: | , if other than the |
| date this docun | ment was signed. | 1/2021 | |
| Effective date | | <u></u> | |
| | | tno more than 90 days after amendment f | île date) |
| | | ock does not meet the applicable statutory filing requestrment of State's records. | airements, this date will not be listed as the |
| Adoption of A | amendment(s) | (<u>CHECK ONE</u>) | |
| | ment(s) was/were ado not required. | pted by the incorporators, or board of directors without | shareholder action and shareholder |
| | ment(s) was/were ado eholders was/were su | pted by the shareholders. The number of votes cast for ficient for approval. | the amendment(s) |
| ☐ The amendi | ment(s) was/were app parately provided for | roved by the shareholders through voting groups. The each voting group entitled to vote separately on the an | following statement tendment(s): |
| "The | number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | | <u> </u> | |
| , | | (voting group) | |
| | 8/13/2021 Dated | | • |
| | 15accu | 119 | _ |
| | Signature | | <u> </u> |
| | selected | rector, president or other officer – if directors or office l, by an incorporator – if in the hands of a receiver, trus ed fiduciary by that fiduciary) | |
| | | Claudio Benedetti | |
| | | (Typed or printed name of person signing) | |
| | | President | |
| | | (Title of person signing) | |