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(Cit	ty/State/Zip/Phone	∌#)
PICK-UP	☐ WAIT	MAIL
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	-	
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(55	coment (rumber)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filina Officer:	
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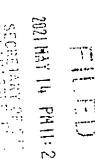
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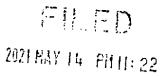
TO: Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: GNI, LE GRANI), INC	
DOCUMENT NUMB	0230100001040		
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
		GIORGI GIORGADZE	
•	Name of Contact Person		
		GNL LE GRAND, INC	
-	<u> </u>	Firm/ Company	
		212 S FEDERAL HWY	
-		Address	
		BOCA RATON, FL 33432	2
		City/ State and Zip Cod	e
	GN	LLEGRAND@GMAIL.C	OM
-		sed for future annual report	
	concerning this matter, pleas		-777-5577
Name o	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address adment Section fon of Corporations 30x 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address Intent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation οſ

GNL LE GRAND, INC



(Name of Corporation as currently filed with the Florida Dept. of State)

P21000010689

(Docur	ment Number of Corporation (if kno	own)
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corp.	oration adopts the following amendment(
A. If amending name, enter the new name of the c	corporation:	
		The new
name must he distinguishable and contain the word "e"lnc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbre	" or "Co". A professional corp-	porated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BC	<u></u>	
D. If amending the registered agent and/or registenew registered agent and/or the new registered		er the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address;		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent: I am familiar with and accept the c	obligations of the position.
Sign	nature of New Registered Agent, if c	hanging

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)

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	TATIANA BIDBUNOVA	18401 COLLINS AVE, BLDG 100
Add			UNIT 104
Add			North Miami Beach, FL 33160
2) Change	S	TATIANA BIDBUNOVA	18401 COLLINS AVE, BLDG 100
X Add			UNIT 104
Remove 3) Change	D	GIORGI GIORGADZE	North Miami Beach, FL 33160 18401 COLLINS AVE, BLDG 100
X Add			UNIT 204
Remove			North Miami Beach, FL 33160
4) Change	TR	GIORGI GIORGADZE	18401 COLLINS AVE. BLDG 100
X Add			UNIT 204
Remove			North Miami Beach, FL 33160
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
•	
	
	
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If an amandment provider for an each	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument it not contained in the amendment usen.
(y nor appareante, marcate 1874)	
	······································

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The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.	0/2021	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bacoument's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	ler action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendicient for approval.	dment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment(s	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
05/10/20; Dated	21	
Signature	GORT 05/10/200/ .	
	rector, president or other officer – if directors or officers have not l, by an incorporator – if in the hands of a receiver, trustee, or oth	
	ed fiduciary by that fiduciary)	er court
	GIORGI GIORGADZE	
-	(Typed or printed name of person signing)	
	PRESIDENT	
•	(Title of person signing)	