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ALLAHASSEE, FLORID

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION:	GROUPAZ COR	Ρ
DOCUMENT NU	MBER:	P9700002930	09
The enclosed Artic	eles of Amendment and fee a	e submitted for filing.	
Please return all co	orrespondence concerning th	matter to the following:	
	A	DRES W LOPEZ	
THE TAX GROUP INC. Firm/ Company			
8743 SW 9TH TERRACE SUITE 3			
Address MIAMI FL 33174			
·	C	y/ State and Zip Code	
	taxgru E-mail address: (to be use	@bellsouth.net for future annual report notification	n)
For further information	ntion concerning this matter,	please call:	
AN	DRES W LOPEZ	at (305)	223-4648
	of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a checl	k for the following amount r	ade payable to the Florida Dep	partment 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 d) Certified Copy (Additional Copy is enclosed)
Mailing Ac	<u>ldress</u>	Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee FL 32314		2661 Executive Center Ci	ircle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

GROUPAZ CORPOLATION

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

P97000029309

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

must be distinguishable and contain	the word "corporation," "compa	The no
eviation "Corp.," "Inc.," or Co.," or the emust contain the word "chartered," "pro	e designation "Corp," "Inc." or "C	Co". A professional corporati
inter new principal office address, if app	nlicable:	
ncipal office address <u>MUST BE A STREE</u>	ET ADDRESS)	
Enter new mailing address, if applicable		
Mailing address <u>MAY BE A POST OFFI</u>	<u>(CE BOX</u>)	
f amending the registered agent and/or i		a, enter the name of the
ew registered agent and/or the new regi	stered office address:	
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	(Florida street address)	
		Florida
	(Ciţy)	(Zip Code)
Registered Agent's Signature, if changi	na Registered Agent	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
P,T	ROBERTO L. GUZMAN	5581 SW 8TH ST MIAMI FL 33134	☑ Add ☐ Remove
VP	MARIA C. BARBARO	5581 SW 8TH ST MIAMI FL 33134	
			☐ Add ☐ Remove
	ding or adding additional Articles, end dditional sheets, if necessary). (Be spe		
	O L. GUZMAN OWNS 50% AND STOCK ISSUED.	MARIA C. BARBARO OV	/NS 50%
E Manage			
<u>provisi</u>	nendment provides for an exchange, rons for implementing the amendment out applicable, indicate N/A)		
-			
		· 	

The date of each amendment(s	
•	(date of adoption is required)
Effective date <u>if applicable</u> : _	
,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e 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):
"The number of votes ca	nst for the amendment(s) was/were sufficient for approval
by	w.
(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Signature (By a select	director, president or other officer = if directors or officers have not been led, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
аррог	MARIA C. BARBARO
	(Typed or printed name of person signing)
	VICE-PRESIDENT
	(Title of person signing)