## P971000029309

(Re	equestor's Name)	
(Ac	ldress)	
. (Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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TA DEC 16 PN 1: 59

Amend 10,20,13

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

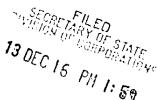
Tallahassee, FL 32314

GROUPAZ CORPORATION NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CABRIEL BALDASSINI REGISTERED AGENT Firm/ Company NW 72 rd Ave SU Address E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: GABRIEL BALDRESINI Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation



of	
GROUPAZ GORPORATION	
(Name of Corporation as currently filed with the Flo	rida Dept, of State)
<u> 79700029309</u>	
(Document Number of Corporation (if	known)
tursuant to the provisions of section 607,1006, Florida Statutes, this $F$ is Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "Corp" "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_ N/A
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	19/A
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  Name of New Registered Agent	ess in Florida, enter the name of the
(Florida stre	, Florida
New Registered Apent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar w	(Zip Code)  ith and accept the obligations of the position.

Signature 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 Do	2	
X Remove	<u>Y</u>	Mike Jor	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>úth</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
Change Add Remove	VP	_	GUZMAN ROBERTO	5581 SW 87H ST Miami, FL 33134
2) Change Add Remove	PT	1	BARBARO MARIAC.	5581 SW 8H ST Miami, FL 33134
Change Add Remove		-		
4) Change Add Remove		_	<b>₩</b>	
5) Change Add Remove		<del></del>		
6) Change		_		
Remove				

ach additional sheets, if ne	vessary). (Be specific	)		
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amendment provides fo	r an exchange, reclassi	fication, or cancellat	ion of issued shares,	
visions for implementing (if not applicable, indica-	the amendment if not to N/A)	contained in the ame	endment itself:	
W PF	,			
		<del></del>		
A-S-4	····		<u> </u>	
· <del></del>				
<del></del>				

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_12/06	3/12/1	
Signature /		
(Ay a di	rector, president or other officer, if directors or officers have not been	
	l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Vice Presidente	
•	(Title of person signing)	_