P1200000 8647

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BEST QUALITY	RESEARCH INC.				
	BER: P12000008647					
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	ABNER CASTRO RAMIRE	Z				
	Name of Contact Person					
	BEST QUALITY RESARCH INC.					
		Firm/ Company				
	14347 SW 50 ST					
		Address				
	MIAMLEL 33175					
		City/ State and Zip Cod	e			
	AC@OSWABHK.COM					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, plea	se call:		*?o	-)-1	
ABNER CASTRO R	AMIREZ	786 at (424-3860			
Name	of Contact Person		de & Daytime Telephone Number	_ :	근꽃림	
Enclosed is a check for the following amount made		payable to the Florida Dep	artment of State:	75.	- 일어 - 일어	
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)	<u>સ</u> 3 <u>1</u>	TATE	
Am Div P.C	illing Address sendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303			

Articles of Amendment to Articles of Incorporation of

BEST QUALITY RESEARCH INC.	B	EST	OUAI	TTY	RESEA	VRCH	INC.
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(<u>Name o</u>	f Corporation as currently filed with th	ne Florida Dept. of State)	- 7, 3
P12000008647			ر جي رف
	(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit</i>	Corporation adopts the following	amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". A professional	"incorporated" or the abbreviation	
B. Enter new principal office address, i (Principal office address <u>MUST BE A S.</u>			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST C			
D. If amending the registered agent an new registered agent and/or the new		a, enter the name of the	
Name of New Registered Agent	ABNER CASTRO RAMIREZ		
	(Florida street address)		
New Registered Office Address:	14347 SW 50 ST MIAMI	, Florida_33175	
	(City)	(Zip Co	nde)
New Registered Agent's Signature, if el I hereby accept the appointment as registe			

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:	. ,	G Santo, or as an Mad.	
X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	ABNER CASTRO RAMIREZ	14347 SW 50 ST
X Add			MIAMI FL 33175
Remove			
2)Change	P	ANA J. RAMIREZ	
Add			
X Remove Change	VP	OSMARO RUIZ	
Add			
XRemove			
4) Change	VP	ANIUSKA RUIZ	
Add			
X Remove			
5) Change	VP/S	MARIA G. BOU	8153 W 36 AVE #2
X Add			HIALEAH GARDENS FL 33018
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specifie)	
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	inge, reclassification, or cancellation of issued a diment if not contained in the amendment itsel	
	· · · · · · · · · · · · · · · · · · ·	
		

The date of each amendment(s) ac	loption:		26	2020	, if other than the
date this document was signed.			•	1	
Effective date if applicable:					
	(no more than 90 da	ivs after ame	ndment f	ile date)	
Note: If the date inserted in this b document's effective date on the De		e statutory f	ling requ	airements, this dat	e 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 boar	rd of director	s withou	t shareholder actio	on and shareholder
The amendment(s) was/were ado by the shareholders was/were su		imber of vote	s cast fo	the amendment(s	;)
	roved by the shareholders throug each young group entitled to vote for the amendment(s) was/were s	e separately	on the an		nı
- T	Marka 1	unicient to	арұлоуат		
5/26/2020 Dated	(voring group)				
Signature			2	Raure	7)
selected	rector, president or other officer- l, by an incorporator – if in the ha ed fiduciary by that fiduciary)				
	ABNER CASTRO RAMIREZ, I	PRES A	NA J. RA	MIREZ, FORME	R PRES
	(Typed or printed nan	ne of person	signing)		-
	(Title of person signin	<u> </u>			