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COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: BRIGHT BAY RE	SOURCES, INC.		
DOCUMENT NUMBER: P12000100151			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this man	tter to the followin	ig:	
MARK KAMILAR			
	Name of Conta	act Perso	on
 	F: 70	<u> </u>	
2921 SW 27 AVENUE	Firm/ Con	npany	
	Addre	SS	
MIAMI, FL 33133			
	City/ State and	Zip Co	de
kamilar@bellsouth.net			
E-mail address: (to be us	and for future annu	ol asaos	- marificantion)
E-man address. (to be us	sed for future annu	ан терог	t notification)
For further information concerning this matter, pleas	se call:		
MARK KAMILAR	at (5	567-1112
Name of Contact Person		Area C	ode & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Flor	rida Dep	partment of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□S43.75 Filing Certified Cop (Additional ec enclosed)	y	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Divisi Glifto 2661	t Address dment Section ion of Corporations n Building Executive Center Circle nassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

DRIGHT DAT RESOURCES	·
(Name of Corporation as currently file	ad with the Florida Dept, of State)
P12000100151	
(Document Number of Co	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> its Articles of Incorporation:	ida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The second
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</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 office address new registered agent and/or the new registered office address:	in Florida, enter the name of the
Name of New Registered Agent	
(Florida street a	ddress)
New Registered Office Address:	. Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position.
Signature of New Regis	tered 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.

Example: X Change	<u>PT</u>	John Doe		
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	VD	BRIAN KAMILAI	R	1256 SW 19 ST
X Add				MIAMI, FL 33145
Remove			ļ	
2) Change		-		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove			l	
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

. If amending or adding additional Articles, enter change(s) here (Attach additional sheets, if necessary). (Be specific)	e:
If an amendment provides for an exchange, reclassification, or provisions for implementing the amendment if not contained i	cancellation of issued shares, n the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	•	
Effective date <u>if applicable</u> :		
	(no more than 9	0 days after amendment file date)
Note: If the date inserted in this document's effective date on the De		cable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad- by the shareholders was/were st		e number of votes cast for the amendment(s)
		ough voting groups. The following statement vote separately on the amendment(s):
	for the amendment(s) was/we	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adaction was not required.	opted by the board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators with	nout shareholder action and shareholder
Dated	21/17	
Signature	7 _ \	
(By a c	director, president or other offi	cer – if directors or officers have not been
	ed, by an incorporator – if in the sted fiduciary by that fiduciary	e hands of a receiver, trustee, or other court
ирроп		
	MARK KAMILAR	
	(Typed or printed	name of person signing)
	PRESIDENT	
	(Title	of person signing)