P15000010670

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION:	2BEES INVESTMENTS	, INC.		
OCUMENT NUMBER: P15000010670					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
		BURCU ESER			
_		Name of Contact Persor	1		
	2BEES INVESTMENTS, INC.				
_		Firm/ Company			
	5421 KEMKERRY RD				
-		Address			
	WESLEY CHAPEL, FL 33543				
_		City/ State and Zip Code	e		
	OFFIC	E@SUNSETACCOUNTI	NG.NET		
-		sed for future annual report			
	concerning this matter, pleasure.	se call:	956-6687		
Name of Contact Person			de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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 Certified Copy (Additional Copy is enclosed)		
Mailing Address			Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327			on of Co rp orations entre of Tallahassee		
Tallahassee, F1, 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

of

2BEES INVESTMENTS, INC.

10

(Name of Corporation as curre	ently filed with the Florida Dept. of State)	
P1500	00010670	
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, that Articles of Incorporation:	his Florida Profit Corporation adopts the fol	Howing amendment(s
A. If amending name, enter the new name of the corporation:	<u>:</u>	
		Thenew
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.	A professional corporation name must of	
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		L-)
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		•
		•
		<u> </u>
D. If amending the registered agent and/or registered office a		<u> </u>
new registered agent and/or the new registered office addr	ress:	
Name of New Registered Agent		
(Florida	ı street address)	
New Registered Office Address:	, Florida	
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent's		242
I hereby accept the appointment as registered agent. I am famili	ar wun ana accept the obtigations of the pos	шон.
Signature of New	w Registered Agent, if changing	
Charlest applicable		
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 Doc	
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>	Address
1) Change	þ	EMINE ESER	5421 KEMKERRY RD
X Add			WESLEY CHAPEL, FL 33543
Remove			
2) X Change	VP	BURCU ESER	5421 KEMKERRY RD
Add			WESLEY CHAPEL, FL 33543
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ach additional she	g additional Articles, if necessary).	(Be specific)	<u> </u>			
						
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in amendment pro	ovides for an excha	nge, reclassific	eation, or cane	ellation of issu	ed shares,	
ovisions for imple	menting the amenor, indicate N/A)	dment if not co	ontained in the	amendment it	<u>self:</u>	
(if not applicable	2, indicate N/A)					
				· · · · · · · -	··	

e date of each amendment(s) adoption: if	other than th
e this document was signed.	
fective date if applicable: (no more than 90 days after amendment file date)	
ite: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be cument's effective date on the Department of State's records.	se fisted as th
loption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and share action was not required.	holder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
by	
11/2/2020	
Dated	
Signature (Section 2017)	
Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
BURCU ESER	
(Typed or printed name of person signing)	
VIÇE PRESIDENT	
(Title of person signing)	