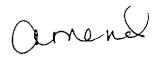
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: B M TEXTILES II	NC 		
DOCUMENT NUN	1BER: P96000064086			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	ISIS ISABEL			
		Name of Contact Persor	1	
	H & I TAX INVESTMENT	CORP		
		Firm/ Company		
	1860 N PINE ISLAND RD S	STE 144		
	· · · · · · · · · · · · · · · · · · ·	Address		
	PLANTATION, FL, 33322			
		City/ State and Zip Code	:	
	ADRIANA@HITAXCORP.0	COM		
	•	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call: at (	600-5801	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
	O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

2021 APR - 2 51111:40

B. M TEXTILES INC (Name of Corporation as currently filed with the Florida Dept. of State) P96000064086 (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: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.." "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) 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 Registered Agent, if changing

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)

Example:

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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change	PT	BERNARDO JR N	MALDONADO	1850 NW 21 ST , MIAMI, FL, 331
Add X				
2) Change X Add	PT ——	ROBERTO MALI	DONADO	1850 NW 21 ST . MIAMI, FL, 331
Remove 3 ) Change				
Add				
4) Change				
Remove				
5) Change Add		<u> </u>	·	
Remove				
6) Change Add				
Remove				

amending or adding attach additional sheet	s, if necessary).	(Be specific)				
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an amandment proj	cidae far an exc	hange reclassifies	ation or cancellat	tion of issued sha	res.	
an amendment provisions for implet	nenting the am	endment if not cor	ntained in the am	endment itself:	<u> </u>	
(if not applicable,	indicate N/A)					
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	option:	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment	file date)
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requartment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors withou	ut shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for ficient for approval.	or the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the ac	
"The number of votes east i	for the amendment(s) was/were sufficient for approva	1
by		
	(voting group)	
Dated3/	24/2021 Benado Iddaedo	
		<del></del>
	rector, president or other officer – if directors or office, by an incorporator – if in the hands of a receiver, true.	
	ed fiduciary by that fiduciary)	Sicc. of Other Court
	Beenseso Maldonasos	
-	(Typed or printed name of person signing)	
	Pre Si Deut	
-	(Title of person signing)	