293843

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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BAY CRE	ST PLAZA INC
DOCUMENT NUMBER: 293843	
The enclosed Articles of Amendment and fee are sub	omitted for filing.
Please return all correspondence concerning this mat	ter to the following:
<u>Jillian Pipe</u> PJs Mana	r Palori Name of Contact Person gement Firm/ Company
<u>4145 Hendi</u>	erion Blvd
Tampa, F	L 33629 City/ State and Zip Code
2016	City/ State and Zip Code
	-0502 @ gmail.com
E-mail address: (to be us	ed for future annual report notification)
For further information concerning this matter, pleas	e call:
Jillian Piper Palori	at (270) 791-5408
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐\$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

BHY CREST PLAZA	INC	
(Name of Corporation as currently	filed with the Florida Dept.	of State)
293843		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation ado	pts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
NIA		The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or professional corporation nan	the abbreviation "Corn."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA	3 3 7
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Pete Anthon Hulf Handon	y Palori III	2: 28 EE. FIE
4145 Henderson	Blu. Tampa, f	<u>-L 3362</u> 9
New Registered Office Address: NA	•	Florida NIA (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Signature of New Re	ith and accept the obligations of	of the position.

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Şally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	Pete Anthony Palori Jr	4145 Henderson Blvd
Add Remove			Tampa, FL 33629
2) X Change Add	PD	Pete Anthony Palon III	4145 Henderson Blvd
Remove 3) Remove Change	T	Jilian Piper Palori	Tampa, FL 33629 4145 Henderson Blvd Tampa, FL 33629
Remove 4) Change Add		-	
Remove 5) Change Add			
Remove 6) Change			
Add			
Remove			

	tional sheets, if necessary	y. (De apecific)			
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	dment provides for an e	xchange, reclassifi-	cation, or cancellati	on of issued shares.	
ап атеп	for implementing the a applicable, indicate N/A)	mendment if not co	ontained in the ame	ndment itself:	
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an amen provisions (if not	appucable, maicale N/A)				
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The date of each a date this document	mendment(s) adoption: 8 19202 , if other than the was signed.
Effective date <u>if ar</u>	plicable:
	(no more than 90 days after amendment file date)
	nserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
Adoption of Amen	dment(s) (<u>CHECK ONE</u>)
The amendment action was not re	(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder equired.
	(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.
☐ The amendment must be separate	(s) was/were approved by the shareholders through voting groups. The following statement ely provided for each voting group entitled to vote separately on the amendment(s):
"The num	per of votes cast for the amendment(s) was/were sufficient for approval
by	
	(voting group)
Ε	Pated 913017021
S	ignature COLD
	(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)
	Pete A Pajori III
	(Typed or printed name of person signing)
	DP
	(Title of person signing)