490197

| (Requestor's Name) | | | |
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| (Address) | | | |
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| (Address) | | | |
| (1,001,000) | | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| (Cashings Chair) | | | |
| (Decument Number) | | | |
| (Document Number) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
| eposition mondered to 1 ming officer. | | | |
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Office Use Only



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N.C. C.COULLIETTE

JAN 24 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

| NAME OF CORPORATION: | BEE NATURAL HONEY, CO | | | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBER: | 490197 | | | | |
| The enclosed <i>Articles of Amendment</i> and fee are submitted for filing. | | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Drew S. Sheridan Name of Contact Person | | | | | |
| Law Office | of Drew S. Sheridan Firm/Company | | | | |
| 7765 SW 87 Ave #102 | | | | | |
| Miani, FL 33173 City/ State and Zip Code | | | | | |
| drew Sheridan @ drew Sheridan pa. Com E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this matter, please call: | | | | | |
| Drew S. Sheridan Name of Contact Person | at (305) 596-3368 Area Code & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount made payable to the Florida Department of State: | | | | | |
| \$35 Filing Fee \$43.75 Filing Certificate of | | | | | |
| Mailing Address Amendment Section | Street Address Amendment Section | | | | |

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment Articles of Incorporation of

BEE NATURAL HONEY, CO.

| (Name of Corporation as currently filed with the Florida Dept. of State) | |
|--|--|
| | |
| 40040= | |

| 490197 | |
|---|--|
| (Document Number of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adamendment(s) to its Articles of Incorporation: | lopts the following |
| A. If amending name, enter the new name of the corporation: | |
| Island Supply & Trading Company | The new |
| name must be distinguishable and contain the word "corporation," "company," or "incorporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional name must contain the word "chartered," "professional association," or the abbreviation "P.A." | nted" or the |
| 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 new registered agent and/or the new registered office address: | SECRETARY OF STAIL VISION OF CORPORATIONS 11 JAN 19 AM IO: 19 |
| Name of New Registered Agent: | |
| New Registered Office Address: (Florida street 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 t | he position. |

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, same, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

| <u>Title</u> | Name | Address | Type of Action |
|--------------|---|--|--|
| | | | Add Remove |
| | | | П с |
| | | | |
| | nding or adding additional Articles, additional sheets, if necessary). (Be | | |
| | | | |
| | | | |
| <u>provi</u> | amendment provides for an exchang sions for implementing the amendment of applicable, indicate N/A) | e, reclassification, or cancella ent if not contained in the am | ation of issued shares, endment itself: |
| | | | |
| | | | |
| | | | |

| The date of each amendment(s) adoption: JANU/ | ARY 10 2011 |
|---|--|
| (date of | adoption is required) |
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after | r amendment file date) |
| | |
| Adoption of Amendment(s) (CHECK ONE | |
| ✓ The amendment(s) was/were adopted by the shareholde by the shareholders was/were sufficient for approval. | rs. The number of votes cast for the amendment(s) |
| The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entit | |
| "The number of votes cast for the amendment(s) w | as/were sufficient for approval |
| by | , |
| (voting group) | |
| The amendment(s) was/were adopted by the board of di action was not required. | rectors without shareholder action and shareholder |
| The amendment(s) was/were adopted by the incorporate action was not required. | ors without shareholder action and shareholder |
| Dated_January 10_2011 | |
| Signature | |
| | officer - if directors or officers have not been |
| selected, by an incorporator – if appointed fiduciary by that fiduciary | in the hands of a receiver, trustee, or other court ciary) |
| | Sary Avins |
| (Typed or print | ed name of person signing) |
| | President |
| (Title of person sig | |
| • | |