## NO 9000000830

(Re	questor's Name)	
· (Ad	dress)	
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(Au	uiess)	
(Cit	y/State/Zip/Phone	∋ #)
_	_	_
PICK-UP	WAIT	MAIL
Ru	siness Entity Nan	na)
(64	Siness Entity Ivan	ne)
(Do	cument Number)	****
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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O9 JUL 23 PH 1:57
SECRETARY OF STATE
SECRETARY OF STATE

Amend\*N.C. C.COULLIETTE

JUL 27 2009

**EXAMINER** 

## COVER LETTER

Division of	Corporations		•
NAME OF CORE	PORATION:	Bayti"	
DOCUMENT NU	MBER:		
The enclosed Artic	cles of Amendment and fee are sub	omitted for filing.	
Please return all co	orrespondence concerning this mat	ter to the following:	
	Mrs Elso	ZE Nassif	-
	(Name of	Contact Person)	
	(Firm	n/ Company)	
	10630 NW	14th st # 1 Address)	'/ <b>8</b>
	`	ŕ	
	Plantation (City/Sta	Pla. 33322	
_	(City/ Sta	te and Zip Code)	
e	loy 2000 _ 34 D U	jahoo. com	ation)
			mon)
For further informa	ation concerning this matter, pleas	e call:	
Sam	e as above	at (954) 60 9	94460
(Nar	me of Contact Person)	(Area Code & Daytir	ne Telephone Number)
Enclosed is a check	k for the following amount made p	payable to the Florida Department	t 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)
	ailing Address nendment Section	Street Address Amendment Section	,

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## **Articles of Amendment**

to

## Articles of Incorporation of

	ti I	<del></del>	
(Name of Corporation as cutpent)	ly filed with	the Florida Dept.	of State)
(Document Number	r of Corporat	ion (if known)	
Pursuant to the provisions of section 617.1006, Flo the following amendment(s) to its Articles of Incor		, this <i>Florida Not</i>	For Profit Corporation adopts
A. If amending name, enter the new name of the		ik In	)C.
The new name must be distinguishable and contra abbreviation "Corp." or "Inc." "Company" or "	ain the word	"corporation" or	"incorporated" or the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		····	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )		09 JUL 28 SEGRETARY ALLAHASSET
			PH 1:57
D. If amending the registered agent and/or registered agent and/or the new register			la, enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Flor	ida street address)	
<del></del>		(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered ag position.			accept the obligations of the
Sign	ature of New	Registered Agent,	if changing

	ditional sheets, if necessary)	Officer and/or Director being	<u>g added:</u>
Γitle	Name	Address	Type of Action
		<u> </u>	□ A.J.J
			☐ Remove
			Add
			☐ Remove
			☐ Add
<del></del>			Remove
	nding or adding additional Articles,		
(attach	additional sheets, if necessary). (Be	specific)	
11	e pur pose	of Be	zytik"
11	Le purpose	of Bo	zytiK"
71	, ,	of "Bo	zytiK"
71	, ,	of "Bo	zyti K"
7)	is :		
<i>'</i>	is :	in ment	
	is: to help	in ment	
	is :	in ment	in high
	is: to help	in ment	
a	is: to help distresse	in ment	in high
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The date of each amendment(s) adoption	n: July 30, 2009  (date of adoption is required)
	(date of adoption is required)
Effective date if applicable:	
(ne	o more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted b was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)
There are no members or members ent adopted by the board of directors.	titled to vote on the amendment(s). The amendment(s) was/were
Dated	<u>Vassi</u>
(By the chairman have not been s	an or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or ointed fiduciary by that fiduciary)
	415. Elsy E. Wassif
	(Typed or printed name of person signing)  (Title of person signing)
	(Title of person signing)