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

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION:	ATION: BETK FOUNDATION, INC			
	MBER:				
			· · · · · · · · · · · · · · · · · · ·		
The enclosed Artic	eles of Amendment and fee ar	e submitted for filing.			
Please return all co	Please return all correspondence concerning this matter to the following:				
_ ••		RNAR ESPAÑOL	<u>•</u>		
	Na	me of Contact Person			
	BETK IN	NTERNATIONAL, INC.			
		Firm/ Company			
			•		
•	2250 NW 114TH AVE UNIT 1 P ATTN PTY 9228				
		Address			
	MIAN	/II, FLORIDA 33172			
	City/ State and Zip Code				
BE@BETK.ORG					
	E-mail address: (to be used for future annual report notification)				
For further inform	ation concerning this matter, p	slanga anll:			
			•		
BEI	RNAR ESPAÑOL	at (305 ·) - 51	9-4174		
BERNAR ESPAÑOL at (305) 519-4174 Name of Contact Person 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 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		Street Address			
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327		Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 8, 2010

BERNAR ESPANOL BETK INTERNATIONAL, INC. 2250 NW 114TH AVE UNIT 1P ATTN PTY 9228 MIAMI, FL 33172

SUBJECT: BETK FOUNDATION, INC.

Ref. Number: N09000005569

We have received your document for BETK FOUNDATION, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Letter Number: 710A00016651

Teresa Brown Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of	TALLARITAR AMPO
BETK Foundation, Inc. (Name of Corporation as currently filed with the Florida Dept.	of State)
NO 90000 5569 (Document Number of Corporation (if known)	

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

the following amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation	<u>n:</u>
BETK Internationa	1. Inc.
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2250 NW 114th AVE UNIT 1P
(1. morphi office dumess <u>install as its annual installed</u>)	Attn PTY 9228
	Miami, FL 33172
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 025724
	AHM: PTV 9228
	Miami CL 33102
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address: (Flore	da street adiress)
	(City), Florida_(Zip Code)
position.	familiar with fand accept the obligations of the
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, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>		Address		Typ	e of Action
	·	N (Add- Remove
						Add Remove
•		· · · · · · · · · · · · · · · · · · ·	· .			Add Remove
E. If amer	nding or adding a additional sheets,	dditional Articles, en if necessary). (Be sp	ter change(s) he	<u>re</u> :		
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The date of each amendment(s)	adoption:	July 1, 20	110
Effective date <u>if applicable</u> :	JULY 187	f adoption is requir _ 2010 days after amendm	
Adoption of Amendment(s)	(CHECK ON	<u>E</u>)	
The amendment(s) was/were a was/were sufficient for approve	•	and the number of	votes cast for the amendment(s)
There are no members or men adopted by the board of direct		the amendment(s).	The amendment(s) was/were
have no		incorporator - if in	resident or other officer-if directors the hands of a receiver, trustee, or
_	BERNAL (Typed or prir	ESPANUL nted name of person	n signing)
_	PRESIDENT (Title of	OWNER f person signing)	

Page 3 of 3