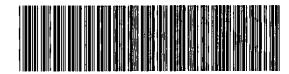
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SLOBETARY OF STATE
TALLAHASSEE, FLORIDI

Th 7-10-11

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BATI INC

DOCUMENT NUMBER: 1100000	07438		
The enclosed Articles of Amendment and fee are subn	nitted for filing.		
Please return all correspondence concerning this matte	r to the following:		
FREDEUNE AMEDEE - BENTAMINI (Name of Contact Person)			
Bati (Firm/Company)			
4751 Sugar A	ne DR:	,	
BOCA RATON FL 33487			
(City/ State	and Zip Code)		
Amedee Bentamina Uahou. com E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
FREDELINE AMEDET-BenTA	M/At (954) 557 (Area Code & Daytime		
Enclosed is a check for the following amount made payable to the Florida Department of State:			
\$35 Filing Fee \$\ \times \\$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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ŕ	

Articles of Amendment Articles of Incorporation of

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01		PLONE TAN
B.A.T. I. inco.		FALLAHASSEE, FLORIDA
(Name of Corporation as currently filed with	the Florida Dept. of Stat	e) SLE, FLORIDA
N10000007438		
(Document Number of Corporat	tion (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Pro</i>	ofit Corporation adopts
A. If amending name, enter the new name of the corporation	on:	
B. A. T. I Mhook inc		
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may no	l "corporation" or "inco	rporated" or the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		est Hill Blud Beach, FL
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	33406 P.D. BOX West Palm 33416	17057 Bch, F/
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad Name of New Registered Agent:		r the name of the
New Registered Office Address: (Flor	ida street address)	-
They negate to Office Address. (Prof	ina dii oo aaan odd	
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A		the obligations of the

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, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

<u>Title</u>	Name	Address	Type of Action
S ₋	Enency Jean-Mary	3069 Forest Hill BIND WPB, F1 33406	Add Remove
			☐ Add ☐ Remove
			Add Remove
E. If amendin (attach addi	g or adding additional Articles, enter tional sheets, if necessary). (Be specif	change(s) here: ic)	
		the date of	

The date of each amendment(s)	
F100	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.
There are no members or mer adopted by the board of direct	nbers entitled to vote on the amendment(s). The amendment(s) was/were ors.
Dated Signature(By the	7 13 11 Alice chairman of the board, president or other officer-if directors
have n	of been selected, by an incorporator – if in the hands of a receiver, trustee, or ourt appointed fiduciary by that fiduciary)
· -	Fredelike Anedee-Benjamin (Typed or printed name of person signing)
_	Res
	(Title of person signing)

Page 3 of 3