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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BAN TAY NHAN	ALINC	
DOCUMENT NUN	3112000005609		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	JIMMY KIEN		
		Name of Contact Person	1
	BAN TAY NHAN ALINC		
		Firm/ Company	
	1642 HAWKINS COVE DR	•	
		Address	
	JACKSONVILLE FL 32246		
		City/ State and Zip Code	
	BTNAJAX2025@GMAIL.C	ОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
JIMMY KIEN		904896400 <u>-</u> at (3
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	or the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ar Di P.o	ailing Address nendment Section vision of Corporations). Box 6327 llahassec, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BANT	ΓΑΥ	NHAN	ALINC
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	of Corporation as currently	filed with the Florida Dept, of Stat	te)	-	
N12000005698					
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607, ts Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation adopts the	following	g amen	dment(s)
A. If amending name, enter the new n	ame of the corporation:			77.1	
name must be distinguishable and contain 'Inc.,'' or Co.,'' or the designation "C 'chartered,'' "professional association,'	"orp," "Inc," or "Co". A	mpany," or "incorporated" or the of professional corporation name mu	bbreviatio st contair	n "Cor	new p., " vord
3. Enter new principal office address, Principal office address <u>MUST BE A S</u>	if applicable;	1642 HAWKINS COVE DR W			
, , , <u></u>	,	JACKSONVILLE FL 32246			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST)	1642 HAWKINS COVE DR W	Ein Ein	24,03	_	
		JACKSONVILLE FL 32246		11 3.	
			1111	- F	[73] _:T)
If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the		2; S	
Name of New Registered Agent	JIMMY KIEN		7.	ယ	
	1642 HAWKINS COVE DE	: W			
	(Florida stree	t address)			
New Registered Office Address:	JACKSONVILLE FL	, Florida	32246	_	
	((ity)	(Zip C	ode)	
lew Registered Agent's Signature, if c	hanging Registered Agent:				
hereby accept the appointment as regist		th and accept the obligations of the p	position.		
	//	1			
	lles	sistered Agent, if changing			
	Signature of New Res	gistered Agent, if changing			
Check if applicable					

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). 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	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	P	JIMMY KIEN	1642 HAWKINS COVE DR W
Add			JACKSONVILLE, FL 32246
Remove			
2) Change	RO	DAVID KIEN	
Add			2436 CEDAR TRACE DR E
X Remove 3) Change	MGR	DUNG NGUYEN	JACKSONVILLE, FL 32246
X Add	<u></u>		1142 BALLARD RIGDE RD
Remove			JACKSONVILLE , FL 32211
4) Change	P	BINH KIEN	1724 3RD STREET
Add		-	JACKSONVILLE , FL 32246
X Remove			
5) Change	VP	TIFFANY LE	1119 PEPPERWOOD TRAIL
Add			NORCROSS, GA 30093
X Remove			
6) Change		<u> </u>	
Remove			

Attach additional sheets, if necessary).	(Be specific)			
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	<u> </u>			
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f an amendment provides for an exc	hange, reclassification, o	or cancellation of issue	ed shares.	
f an amendment provides for an exc provisions for implementing the am	endment if not contained	l in the amendment its	self:	
(if not applicable, indicate N/A)				
· · · · · · · · · · · · · · · · · · ·	······································			
			·	
				
				
	···			

	DECEMBER 3RD 2024	
The date of each amendment(s) a date this document was signed.	idoption:	, if other than the
	CEMBER 3RD 2024	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this dat epartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	opted by the shareholders. The number of votes cast for the amendment(s ufficient for approval.)
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	भ
	t for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
	(voting group)	
DECEME Dated	ER 3RD 2024	
Signature	les L	
(By a select	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary)	
	JIMMY KIEN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: BAN TAY NHAN	Al INC	
DOCUMENT NUM	N12000005698		
The enclosed Article	s of Amendment and fee are su	binitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	JIMMY KIEN		
		Name of Contact Persor	
	BAN TAY NHAN ALINC		
		Firm/ Company	- ··
	1642 HAWKINS COVE DR	W	
		Address	
	JACKSONVILLE FL 32246		
		City/ State and Zip Code	
	BTNAJAX2025@GMAIL.C	ОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
JIMMY KIEN		9048964003 at (3
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ar Di P.0	neiting Address mendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) N12000005698 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE FL 32246 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address: Name of New Registered Agent May KIEN 1642 HAWKINS COVE DR W JACKSONVILLE FL 32246	BAN TAY NHAN ALINC		
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: The new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE FL 32246 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 1642 HAWKINS COVE DR W		of Corporation as curren	ly filed with the Florida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:	N12000005698		
A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE FL 32246 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent IMMY KIEN 1642 HAWKINS COVE DR W 1642 HAWKINS COVE DR W		(Document Number	of Corporation (if known)
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE FL 32246 C. Enter new mailing address if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent MMMY KIEN 1642 HAWKINS COVE DR W	Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE FL 32246 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent May KIEN 1642 HAWKINS COVE DR W 1642 HAWKINS COVE DR W	A. If amending name, enter the new n	ame of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) JACKSONVILLE FL 32246 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent May KIEN 1642 HAWKINS COVE DR W 1642 HAWKINS COVE DR W			The new
D. If amending the registered agent and/or registered office address: Name of New Registered Agent 1642 HAWKINS COVE DR W	"Inc.," or Co.," or the designation "C	Corp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
JACKSONVILLE FL 32246 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 1642 HAWKINS COVE DR W	• •		1642 HAWKINS COVE DR W
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) JACKSONVILLE FL 32246 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 1642 HAWKINS COVE DR W			
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent IMMY KIEN			JACKSONVILLE FL 32246
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 1642 HAWKINS COVE DR W	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1642 HAWKINS COVE DR W
Name of New Registered Agent 1642 HAWKINS COVE DR W			JACKSONVILLE FL 32246
Name of New Registered Agent 1642 HAWKINS COVE DR W			
Name of New Registered Agent 1642 HAWKINS COVE DR W			
1642 HAWKINS COVE DR W	Name of New Registered Agent	JIMMY KIEN	
(Florida street address)		1642 HAWKINS COVE	DR W
		(Florida st	reet address)
JACKSONVILLE FL 32246 New Registered Office Address: JACKSONVILLE FL 37246	New Registered Office Address:	JACKSONVILLE FL	Florida 32246
(City) (Zip Code)	. To Zio Zio Con Con Con Con Con Con Con Con Con Co		(**************************************
	New Registered Agent's Signature, if c	hanging Registered Agen	Li
New Registered Agent's Signature, if changing Registered Agent:	nereoy accept the appointment as regist	erea ageni. Tam jaminar	with that accept the obligations of the position.
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 the position.		lle	h
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 the position.	-	Signature of New I	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 PT John Doe X Remove V Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) JIMMY KIEN 1642 HAWKINS COVE DR W 1) x Change JACKSONVILLE, FL 32246 __ Add __ Remove RO DAVID KIEN 2) ____ Change 2436 CEDAR TRACE DR E . _____ Add Х JACKSONVILLE, FL 32246 Remove MGR **DUNG NGUYEN** _ Change Х 1142 BALLARD RIGDE RD Add JACKSONVILLE, FL 32211 Remove BINH KIEN 1724 3RD STREET 4) ____ Change JACKSONVILLE, FL 32246 _ Add Х Remove VΡ TIFFANY LE 1119 PEPPERWOOD TRAIL 5) ____ Change NORCROSS, GA 30093 _ Add Remove 6) ____ Change ___ Add _ Remove

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If an amendme	it provides for an e	ychange recluse	ification or con	collution of iccu	nd shawas	
If an amendme	it provides for an expension the same	xchange, reclass	ification, or can	cellation of issu	ed shares,	
If an amendme provisions for (if not ann	it provides for an eximplementing the a	xchange, reclass mendment if no	ification, or can t contained in th	cellation of issue	ed shares, self:	
If an amendme provisions for (if not app	nt provides for an ex implementing the a icable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th	cellation of issue	ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the an include the anicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th	ecllation of issue	ed shares, self:	
If an amendme provisions for (if not app	it provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th	ecllation of issue amendment it	ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the an include the anicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th	ecllation of issues amendment it	ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th	ecllation of issues amendment it	ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th	ecllation of issue amendment it	ed shares, self:	
If an amendme provisions for (if not app	nt provides for an ex implementing the a icable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	it provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app.	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the an icable, indicate N/A)	xchange, reclass mendment if no	ification, or can		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can t contained in th		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the alicable, indicate N/A)	xchange, reclass mendment if no	ification, or can		ed shares, self:	
If an amendme provisions for (if not app	nt provides for an eximplementing the an icable, indicate N/A)	xchange, reclass mendment if no	ification, or can		ed shares, self:	

The date of each amendmen date this document was signed	t(s) adoption:	, if other than the
Effective date if applicable:	DECEMBER 3RD 2024	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehold	er action and shareholder
	re adopted by the shareholders. The number of votes cast for the amendere sufficient for approval.	iment(s)
	re approved by the shareholders through voting groups. The following and for each voting group entitled to vote separately on the amendment(s	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	EMBER 3RD 2024	
Dated Signature	llest	
(I) SO	by a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or oth oppointed fiduciary by that fiduciary)	
	JIMMY KIEN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	