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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Beth Hasten, Inc.		
DOCUMENT NUMBER: N1900011712		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Steven Brock		
(Name of Contact Person)		
Roll Hashen, INC.		,
Beth Hasten Inc. (Firm/Company)		
540 TRINITY LONE N. AJ 6306		
(Address)		-
540 TRINITY Lane N. AST 6306 (Address) St. Retenstrucy F1 33716 (City/ State and Zip Code)	20.	55
(City/ State and Zip Code)	AH 2	- 왕조 - 오토
E-mail address: (to be used for future annual report notification)	2	2007 0 A33
For further information concerning this matter, please call:	9.5	F STAI
Steven Brext at 267-269-9461 (Name of Contact Person) (Area Code) (Daytime Telephone N	<u>.</u>	
(Name of Contact Person) (Area Code) (Daytime Telephone ?	lumber)	
Enclosed is a check for the following amount made payable to the Florida Department of State:		
S35 Filing Fee S43.75 Filing Fee SCertificate of Status Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Scertificate of Status Certified Copy (Additional Copy is Enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Street Address Amendment Section Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Beth Hasham	, Inc.	
Name of Corporation as currently filed with the		7.79
P 1900	n11711	3
	nt Number of Corporation (if known	5, 5, 5,
Pursuant to the provisions of section 617.1006, Flori amendment(s) to its Articles of Incorporation:	da Statutes, this <i>Florida Not For Pro</i>	fit Corporation adopts the following
A. If amending name, enter the new name of the	corporation:	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name.	"corporation" or "incorporated" or	The new the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable Principal office address MUST BE A STREET AL		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	•	503 Duily FL 33731
D. If amending the registered agent and/or regist new registered agent and/or the new registered		r the name of the
Name of New Registered Agent:		
<u>New Registered Office Address</u> :	(Florida s	street address)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.		bligations 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)

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 X Remove X Add	PT John Do V Mike Je SV Sally St	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
E. If amending or addin (attach additional shee	og additional Arti	Page 2 of 4 icles, enter change(s) here: (Be specific)	
			-·· ······

Page 3 of 4
The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated
Signature Signature
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Steven D. Brock
(Typed or printed name of person signing)
President.
(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.