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| PICK-UP WAIT MAIL | |
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| Certified Copies Certificates of Status | _ |
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| Special Instructions to Filing Officer: | |
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Office Use Only



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SECONTIARY OF STATE
PART OF CONTORATIONS
ON THE STATE

Name Change

FEB 2 5 2020 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION:Be+ | helight = | Preserve | Inc. | |
|--|-------------------------------------|---|----------------------------|------------------|
| DOCUMENT NUMBER: NZOC | 000000132 | | | |
| The enclosed Articles of Amendment and fee are su | bmitted for filing. | | | |
| Please return all correspondence concerning this ma | tter to the following: | | | |
| Visten S | to A | | | |
| | (Name of Contact Perso | on) | | |
| - | | | | |
| | (Firm/ Company) | | | |
| 10928 Domany | (Address) | . | | |
| Plant City | FL 3356 (City/ State and Zip Coo | 5 de) | | _ |
| Knstenstoff a yang | ed for future annual report | notification) | | |
| For further information concerning this matter, please | | | | |
| Kristen Stoff (Name of Contact Person | on) (A | 863-398-9 | | |
| Enclosed is a check for the following amount made | , | | • | |
| \$35 Filing Fee \$\Bigcup\$\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) | 29 J.H 39 F | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amen Divisi The C 2415 | t Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 81 hassee, FL 32303 | က် (၁ (၁ (၁ (၁ | PESTATE PESTATE |

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Articles of Amendment

to
Articles of Incorporation
of

| Bethelight | Preserve | Inc. | |
|--|--|----------------------------------|--|
| (Name of Corporation as currently filed with the Florida L | Dept. of State) | | |
| BethelintPresen | | N200000 | 132 |
| Oresenie | er of Corporation (if know | | |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: | es, this <i>Florida Not For Pi</i> | rofit Corporation adopts the | : following |
| A. If amending name, enter the new name of the corporat | ion: | | |
| name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name. | 60-20-ate tion" or "incorporated" o | Tr the abbreviation "Corp." | _The new or "Inc." |
| B. Enter new principal office address, if applicable: | NIA - | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) |) NA - | | |
| | NIA - | | _ |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | NIA | | |
| | NIA | | |
| | NA | | |
| D. If amending the registered agent and/or registered office | | er the name of the | |
| new registered agent and/or the new registered office a | <u>ddress:</u> | | |
| Name of New Registered Agent: | NIA | | |
| | N A (Florida | ı sireei address) | |
| New Registered Office Address: | N | | |
| | (City) | , Florida <u>N</u> (Zip Code) | 14_ |
| New Registered Agent's Signature, if changing Registered | A gent | | |
| I hereby accept the appointment as registered agent. I am fai | | obligations of the position. | 20. |
| | NIA | | |
| Si | gnature of New Registered | Agent, if changing | 2 2 E |
| | | | 14 - 유명 15 - 유명 18 - 유 18 - |
| · · · · · · · · · · · · · · · · · · · | Page 1 of 4 | | |

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:

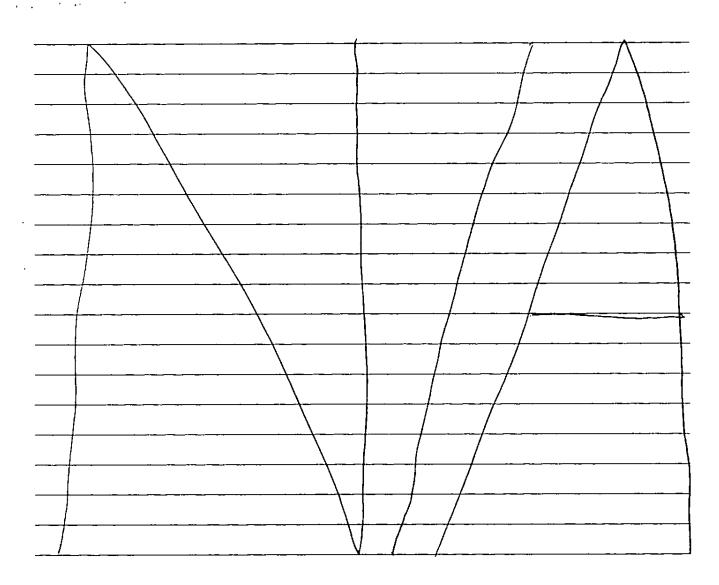
(Attach additional sheets, if necessary)

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 I V Mike I SV Sally S | <u>lones</u> | |
|--|---|--|----------------------------------|
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) <u>NA</u> Change <u>NA</u> Add | MA | NIA | N/A N/A |
| <u>ма</u> Remove | | | |
| 2) <u>MA</u> Change <u>MA</u> Add | NIA | NIA | N/A NLA |
| Remove 3) NA Change NA Add NA Remove | NIA | | N / A N / A N / A N / A |
| 4) <u>Na</u> Change <u>NA</u> Add | MA | NIA | |
| A/A Remove | | | |
| 5) <u>NA</u> Change <u>NA</u> Add | MA | N_A | N/A N/4 |
| NA Remove | | | |
| 6) <u>NA</u> Change <u>NA</u> Add | MIA | N/A | |
| <u>MA</u> Remove | | | NIA |
| E. If amending or addi (attach additional she | | Page 2 of 4 <u>ticles, enter change(s) here</u> : (Be specific) | |
| | | | |
| • | | | |
| | | | |
| | | | |



Page 3 of 4

| The date of each amendment(s) adoption: | 128 1000 if other than the | ne |
|---|------------------------------------|----|
| date this document was signed. | , | |
| Effective date if applicable: | outa 1/28/2020 | |
| | 90 days after amendment file date) | |

<u>Note:</u> 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.

| adopted by the board of directors. |
|--|
| Dated Tuesday Jan 28, 2020 |
| Signature Knister Viscole Stoff |
| (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) |
| Knsten Wicola Stoff (Typed or printed name of person signing) |
| Director |
| (Title of person signing) |

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were