## N21000005487

(Re	questor's Name)	
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1022 FEB -8 PH 12: 35

SECRETARY OF STATE

SECRETARY OF STA

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	SINC 		
N21000005487 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are subr	nitted for tiling.		
Please return all correspondence concerning this matter	_		
,	to the tollowing.		
TIMOFEL PIVNIK			
	(Name of Contact Perso	m)	
BEING HUMAN INC			
	(Firm/ Company)		
1500 BAY RD APT \$1482			
	(Address)		
MIAMEBEACH, FL 33139			
	(City/ State and Zip Coc	le)	
into @ mia ( a	UNHY. U	notification	)
For further information concerning this matter, please	V		
MADINA BAHRETDINOVA		)5	610-2704
(Name of Contact Person	<u> </u>	rea Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Dep	partment of !	State:
■ \$35 Filing Fee	Ci\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)
Marillan Addama	624	4 dalmono	

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32344

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

FILED

BEING HUMAN US INC

2022 FEB -8 PH 12: 35

N21000005487		SECRETARY OF SIME FALLAHASSEE, FLIG
(Document Numb	er of Corporation (if	known)
Pursuant to the provisions of section 617,1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not I</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	tion;	
BEING HUMAN INC		The new
name must be distinguishable and contain the word "corpora" "Company" or "Co," may not be used in the name.	ition" or "incorporat	
B. Enter new principal office address, if applicable:	2555 Collins Ave.	арт 2204
(Principal office address MUST BE A STREET ADDRESS	) Miami Beach, FL.	33140
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2555 Collins Ave.	apt 2204
	Miami Beach, FL, 2	33140
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office a Name of New Registered Agent:		a, enter the name of the
	llins Ave, apt 2204	
<u> </u>	1	Florida street address)
Miami B	each	. Florida 33140
· <del></del>	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		pt the obligations of the position.
 .s	ignature of New Regi	istered 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	<u>V</u> <u>Mik</u>	Doc e Jones y Smith	
Type of Action (Check One)	Title	<u>Na</u> me	<u>Addres</u> s
1) · Change Add	<u>P</u>	PIVNIK, TIMOFFI	2555 Collins Ave, apt 2204 Miami Beach, FL, 33140
Remove			
2) Change Add			
Remove 3 ) Change Add Remove	<del></del>		
4) Change Add			
Remove			
5) Change Add	<del></del>		
Remove			
6) Change Add			
Remove			
E. If amending or ad (attach additional s		Articles, enter change(s) here: c). (Be specific)	
	<del></del>	<u></u>	
		······································	. 10. 4 ***
<del></del>			

(no mos	ee than 90 da	vs after amendment file date)	
The date of each amendment(s) adoption: date this document was signed.  Effective date if applicable:			, if other than the
		·	
	<del></del>		
			···

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

(Title of person signing)