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(((H15000275206 3)))



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Division of Corporations

Fax Number : (850)617-6380

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COR AMND/RESTATE/CORRECT OR O/D RESIGN BENTRUST FINANCIAL, INC.

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NOV 20 2015

R. WHITE

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November 19, 2015

FLORIDA DEPARTMENT OF STATE Division of Corporations

BENTRUST FINANCIAL, INC. 701 WATERFORD WAY 300 MIAMI, FL 33126

SUBJECT: BENTRUST FINANCIAL, INC.

REF: P00000048793

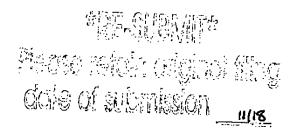
We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II FAX Aud. #: H15000275206 Letter Number: 915A00024447



P.O BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of

. 15 NOV 13 AN 10: 00

	of	The first the second of the	
BENTRUSTFINANCIAL, INC		PREMARKEEL, FLORING	
	of Corporation as current	ly filed with the Florida Dept. of State)	
P00000048793		60	
	(Document Number of	of Corporation (if known)	
tursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment	
. If amending name, enter the new na PNG1, INC.	ime of the corporation:		
name must be distinguishable and con	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
Enter new principal office address, if applicable:		PNG1,INC	
Principal office address <u>MUST BE A S</u>		1195NW 97TH AVENUE	
		DORAL, FL 33172	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PNG1,INC	
		C/O MARIA CARRERAS	
		1195NW 97TH AVENUE , DORAL, FL 33172	
If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	FRANK J. CARRERAS		
	701 WATERFORDWAY	r, #300,MIAMI 33136	
	·	reet address)	
New Resistered Office Address:	1195NW 97TH AVENU	, Florida	
		(City) (Zip Code)	

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	PT	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	<u>v</u>	MICHAEL J.ALAVAREZ	701 WaterfordWay
Add			Miami
X Remove			FL 33136
2) Change	V	LUIS QUINONES	701 WaterfordWay
Add			Miami
X Remove			FL 33136
3)Change	V	VINCENTE CASTRO	701 WaterfordWay
Add			Miami
XRemove			FL 33136
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
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	nange, reclassification, or cancellation of issued shares,
<u>I an amendment provides for an exch</u>	Mingel 1 Cemanded and in Commentered of 150500 5 5 500
provisions for implementing the ame	andment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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provisions for implementing the ame	endment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	andment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	andment if not contained in the amendment itself:

11/19/2015 11:44:54 AM From: To: 8506176380(6/6)

The date of each amendment(s) adoption:	if other than t
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 document's effective date on the Department of State's records.	be listed as (
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Si	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	