P0100080965

(Requ	estor's Name)	
(Addre	ess)	 .
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(City/S	State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: BIAGGIO ENTERFASES INC. DOCUMENT NUMBER: P01000380965
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Steven B. Dell'Amorte
BIAGGIO ENTERPRESOS INC.
2678 ADELE PLACE
1AILE MARY, P. 32746
Steve Del La Hot MAI. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steven B DellAMORte at 954 818-2021 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

BIAGGIO ENT	ERPRISES, INC.			
(Name of Corporati			Dept. of State)	
P01000	0080965			
(Docum	nent Number of Co	rporation (if known)	·	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this <i>Flo</i>	rida Profit Corporati	on adopts the following	g amendment(s) to
A. If amending name, enter the new name of the co	orporation:		•	
				The new
name must be distinguishable and contain the wor "Corp.," "Inc" or Co.," or the designation "Corp. word "chartered," "professional association," or the	, " "Inc, " or "Co"	'. A professional co	corporated" or the ab rporation name must o	obreviation contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD				
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	- <u>X</u>)		SEDRETA OF STATE	FILED
). If amending the registered agent and/or register	red office address	in Florida, enter the	name of the	<u> </u>
new registered agent and/or the new registered				
Name of New Registered Agent				
 -	(Florida street a	ddress)		
New Registered Office Address:			, Florida	
	(Cit	<i>'</i>)	(Zip C	ode)
New Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		and accept the obliga	ations of the position.	
Sign	ature of New Regis	tered Agent, if chang	ino	

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 l	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	P/D	Celia Dellamorte	580 NW43ct
Add			OAKIAMD PARK, FI.
X Remove		:	33309
2) Change	P/D	Steven B. Dell Areset	e 1678 Adelett.
Add			LK. MARY, F/. 32746
Remove			
3)Change			·
Add			
Remove			
4) Change	·		
Add			
Remove			
5) Change			
Add			
Remove	•		
δ) Change			
Add			
Remove			

	ional Articles, enter chang cessary). (Be specific)	. 	
NIA			
			
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an amendment provides fo	r an exchange, reclassifica	tion, or cancellation of	ssued shares,
rovisions for implementing	the amendment if not cor	stained in the amendmen	nt itself:
(if not applicable, indicat	e N/A)		
1 () / (
NIA			
N/A	 		
N/A			
N/A			***************************************
N/A			

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more th	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet the addocument's effective date on the Department of State's record	oplicable statutory filing requirements, this date will not be listed as the s.
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	
"The number of votes cast for the amendment(s) was	/were sufficient for approval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated 10/16/18	
Signature Signature	
(By a director, president or other	officer – if directors or officers have not been n the hands of a receiver, trustee, or other court ary)
Steven B.	DellAmorte
(Typed or prin	ted name of person signing)
$\sqrt{S_{ij}}$	ttle of person signing)
· (T	itle of person signing)