P03000051742

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EE FLORIDA

Amend

OCT 3 0 2012

T. LEWIS

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: B.G. MANAGEMENT CORP DOCUMENT NUMBER: P03000051742 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: LILLIAN SARDINAS Name of Contact Person SARDINAS & ASSOCIATES ACCOUNTANTS, P.A. Firm/ Company 7171 CORAL WAY STE 402 Address MIAMI, FL 33155 City/ State and Zip Code LILLYSARDI@AOL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305) 262-7300

Area Code & Daytime Telephone Number LILLIAN SARDINAS Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section **Division of Corporations** Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

FILED

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B.G. MANAGEMENT CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

TALLAHASSEE, FLORIDA

P03000051742		,	** *** ** *** (**)	SOFF, FI DRIN
(Documen	nt Number of Corporation (if	known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation ac	lopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	o". A professional corpore		
B. Enter new principal office address,				
(Principal office address MUST BE A S	<u>TREET ADDRĘSS</u>)			
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)				
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the nan	ne of the	
Name of New Registered Agent	SARDINAS & ASSOCIATI	ES ACCOUNTANTS, P.A.		
	7171 CORAL W	AY STE 402	•	
New Registered Office Address:	(Florida stree	,	00455	
	MIAMI (City)	, Florida_	33155 (Zip Code)	
	(Cnjy		(Zip Colle)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the obligation	s of the position.	
	gnature of New Registered As	ranso rent, 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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	/ Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	PTS	ENRIQUE GONZALEZ	9500,SW 40 STREET, MIAMI, FL 33165
Add			
Remove			
2) Change	PS	JOSE C PRADO	9500 SW 40 STREET, MIAMI, FL 33165
Add			
X Remove			
3)Change			
Add			
Remove			
4) Change	u		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

			,
			
amendment provides for an exchang	e, reclassification, o	r cancellation of is	sued shares,
visions for implementing the amenda	ent if not contained	in the amendment	itself:
(if not applicable, indicate N/A)			

The date of each amendmen	t(s) adoption: TU-U 1-ZU 1Z
Effective date <u>if applicable</u> :	10-01-2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated X	10-23-12 Lingue Rayer
Signature _/	x Eurifius Quijer By a director, president or other officer – if directors or officers have not been
Si	ppointed fiduciary by that fiduciary)
	EURIQUE GONZALES (Typed or printed name of person signing)
	(Title of person signing)
	(i tile of person signing)