P04000157849

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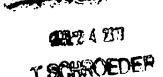


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SCURCIARY OF STATE

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Brown Management	nt Consulting Inc	
DOCUMENT NUME	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Christina Stevens		
		Name of Contact Person	1
	Brown Management Consult	ing Inc	
		Firm/ Company	
	1801 N Military Trail, Suite	, ,	
		Address	
	Boca Raton, FL 33431		
		City/ State and Zip Cod	e
christ	ina.stevens@a4m.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Doreen Brown		at (414-1818
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Brown Management Consulting Inc	
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
F04000157849	
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation	<u>n:</u>
BMETE BMC Global INC	The new
name must be distinguishable and contain the word "corpo" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbrevia	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the tion "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A
(Muiling address MAY BE A POST OFFICE BOX)	197A
	≡ E n
D. If amending the registered agent and/or registered office	address in Florida, enter the name of the
new registered agent and/or the new registered office ad N/A	ioress:
Name of New Registered Agent	
	<u> </u>
(Flor	ida street address)
New Registered Office Address: N/A	, Florida
	(City) (Zip Code)
N/A	(City) (Zip Code) Agent:
Signature of	New Registered 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	PT John	Doe	
X Remove	<u>V</u> <u>Mik</u>	: Jones	
X Add	<u>ŞV</u> <u>Sally</u>	<u>r Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			•
Add			
Remove			
2) Change			10L 23 F
Add			
Remove			<u> </u>
3) Change			## 5
Add			·
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
			
			
			
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		<u>. </u>	
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cance endment if not contained in the a	llation of issued shares, amendment itself:	19 JUL
Λ	<u> </u>	35 (c) 37 (c) 27 (c)	MT 23
			# [7
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		3-11-	&

The date of each amendment(s) a date this document was signed.	doption:, if other
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this locument's effective date on the De	plock does not meet the applicable statutory filing requirements, this date will not be listed epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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 ad action was not required. The amendment(s) was/were ad	opted by the board of directors without shareholder action and shareholder, opted by the incorporators without shareholder action and shareholder
action was not required. June 3, 20 Dated Signature	
(By a c selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	Dorecn Brown
	(Typed or printed name of person signing)
	President
	(Title of person signing)