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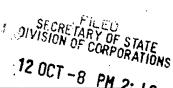
T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CODDODA	TION: BCF SE	POLTS IN	
	R: \$0800002	•	
	Amendment and fee are su		
Please return all correspo	ondence concerning this man	tter to the following:	
_	SYLU	Name of Contact Person	2774
	ESKAY 1	ACCOUNTING S.	ENVICE, INC.
		Firm/ Company	
	1821	LEC STREE	±T
		Address	
	HOLLY	w000 , FL .	33020 - 2406
		City/ State and Zip Code	9
	1 - 1		
	Sophin Q be	115outh.net	matification)
	E-mail address: (to be us	sed for future annual report	nouncation)
For further information of	concerning this matter, pleas	se call:	
SYLUIA	KOUTSODONTI	s at (954	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	ertment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mailir</u>	ng Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 E	xecutive Center Circle
		Tallaha	issee, FL 32301

Articles of Amendment to Articles of Incorporation of



BCF SPORTS	, INC.		12 UCT -8 PM	2:10
(Name of Corporation as currenti	y filed with the Flo	orida Dept. of State)	· · · · · · · · · · · · · · · · · · ·	E. 19
	002473			
(Document Number	r of Corporation (if	known)		
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	rida Statutes, this F	lorida Profit Corpora	tion adopts the following	ng amendment(s)
A. If amending name, enter the new name of the	e corporation:			
				_The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "C	'o". A professional c	ncorporated" or the a corporation name must	abbreviation contain the
B. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u>				-
				_
C. Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE)	BOX)			_
				-
				-
D. If amending the registered agent and/or registered agent and/or the new register		ss in Florida, enter t	he name of the	
Name of New Registered Agent				
	(Florida stre	et address)		
New Registered Office Address:		, F	lorida(Zip Code)	_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		ith and accept the obl	igations of the position.	
	CM D 1.4	if also at a		
Signature of	f New Registered Ag	geni, ij cnanging		

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	CFO	ANNIE MILBAY	MIRAMAR, FL 3302
X Add			MIRAMAR, FL 3302
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	.		
Add			
Remove			
6) Change			_
Add			
Remove			

f amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendmen	it(s) adoption: 9/30/2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) vere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	es cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	9/30/12 V Cruss
Signature _	By a director, president or other officer – if directors or officers have not been
S	by a director, preacted 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)
	CRAIC MILBRY (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Title of person signing)