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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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May 18/1

COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BELLE ON WHEELS INC. Po8000057497 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NARK BARUSTYE

Name of Contact Person Firm/ Company 633 DEERING BAY DR., UNIT 246 MIANI, FL 333158 MarkSarnette @ comcast, net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MARIC BARNETTE at (365) 302-326

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 **□ \$43.75** Filing Fee & **■\$43.75** Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) **Street Address**

Mailing 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

Articles of Inco	rporation o
of	
Belle on wheel	s, luc.
(Name of Corporation as currently filed with t	he Florida Dept. of State
P08000057492	
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation	<u>ı:</u>
name must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	258 SOUTH AVE SE MARIETTA, GA 30060
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	258 SOUTH AVE SE MARIETTA, GA 30060
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add Name of New Registered Agent:	
New Registered Office Address: (Florid	da street address)
(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiary	gent: liar with and accept the obligations of the position.
Signature of New	Registered Agent, if changing

removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) **Title** Name Address Type of Action ☐ Add ☐ Remove ☐ Add ☐ Remove ☐ Add Remove E. Mamending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s) adoption:		
Effective date <u>if applicable</u> : (n	o more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(ve	ting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated6	09	
Signature	lijaliette aben	
selecte	rector president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
_	Elizabeth AIKEN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	