## P08000075908

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(Ad	dress)	·
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: REPLACEM	MENTBANDS.C	OM, INC
DOCUMENT NUMBER: P0800007590		
The enclosed Articles of Amendment and fee are sul		
Please return all correspondence concerning this mat	ter to the following:	
DOUGLAS C FEI	<del></del>	
BBM WHOLESAL	Name of Contact Perso LE CORP	n
	Firm/ Company	_
1800 S OCEAN D		
	Address	
HALLANDALE BE	EACH, FL 3300	9
<u> </u>	City/ State and Zip Cod	
INFO@BBMWHOLE		
	ed for future annual report	notification)
E man address. (to be as	ed for factive unital report	nomeunony
For further information concerning this matter, please	e call:	
DOUGLAS C FEINGOLD	at (561	450-8350
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## REPLACEMENTBANDS.COM, INC

(Name of Corporation as currently filed with	th the Florida Dept. of State)	
P08000075908	,	
(Document Number of Corpora	ation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following	; amendment(s) to
A. If amending name, enter the new name of the corporation	ion:	
BBM WHOLESALE CORP		The new
name must be distinguishable and contain the word "corp" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevio	poration," "company," or "incorporated" or the ab " or "Co". A professional corporation name must c	breviation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	)	
		63
		(2) T
C. Enter new mailing address, if applicable:	· ·	
(Mailing address MAY BE A POST OFFICE BOX)		
	` <b>^</b>	 No
		Cu)
D. If amending the registered agent and/or registered office		
new registered agent and/or the new registered office ac	ddress:	
Name of New Registered Agent		
	rida street address)	
New Registered Office Address:	, Florida	
Her Registered Office Address,	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fan	Agent:	
тистогу иссерт те ирропитет из техняетси идети. Тит јит	nitial with and accept the obligations of the position.	
Signature of Man Desire	stered Agent if changing	
SIRIUUU E OI MEW REVIM	IGIGA AYON, II UNANYINY	

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)	<u>Title</u>	<u>Name</u>	Address
i) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
() G			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Characa			
6) Change			
Add			
Remove			

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

The date of each amendment(s) adoption: UZ/1Z/ZU13	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were act by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes cas	t for the amendment(s) was/were sufficient for approval
by	
The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	lopted by the incorporators without shareholder action and shareholder
Dated 02/12	/2013
Signature	Jey mun
select	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 inted fiduciary by that fiduciary)
	DOUGLAS C FEINGOLD
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)