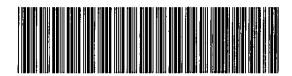
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	•
NAME OF CORPORATION: _	Baerso Enterplies Inc
DOCUMENT NUMBER:	P090000 55638
The enclosed Articles of Amenda	nent and fee are submitted for filing.
Please return all correspondence of	concerning this matter to the following:
	HEISTAN SOSA Name of Contact Person
Bas	RSO EVITERPISES INC Firm/Company
3827	SW 170 Ave
Mirai	City/ State and Zip Code
E-mail add	dress: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
Name of Contact Person	at (786) 238 - 8927  Area Code & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Fili Certificate	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**

	· e
•	Articles of Amendment to Articles of Incorporation of  ENTER P ( SE S INC  rently filed with the Florida Dept. of State)
Baerso g	ENTERPLIES INC
	rently filed with the Florida Dept. of State)
P09 0000 5	563 <i>8</i>
(Document Nun	mber of Corporation (if known)
rsuant to the provisions of section 607.100 nendment(s) to its Articles of Incorporation:  If amending name, enter the new name of	26, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following
if amending name, enter the new name of	t the corporation:
me must contain the word "chartered," "pro Enter new principal office address, if app rincipal office address <u>MUST BE A STREE</u>	<u></u>
(Mailing address MAY BE A POST OFFIC	
	CE BOX
(Mailing address <u>MAY BE A POST OFFI</u>	registered office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or resistered agent agent agent agent and/or resistered agent	registered office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or remove registered agent and/or the new registered.)	registered office address in Florida, enter the name of the
(Mailing address MAY BE A POST OFFICE  If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent:	registered office address in Florida, enter the name of the istered office address:

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>T</u>	Diana Sanchez	3827 SW 170 Ave HIGANUE FL 33027	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
(attach ad	ling or adding additional Articles, ente	i Change(5) nei e. Eific)	
provisio	nendment provides for an exchange, re ons for implementing the amendment if ot applicable, indicate N/A)		
N	A		

The date of each amendment(s	adoption: 10/28/2011
Effective date if applicable:	(date of adoption is required)
· (	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	,,,
(°	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
<u>.</u>	101 28 [ 301]
select	director, preside for other officer – if directors or officers have not been ed, by an incorpolator of in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
	CHRISTIAN SOSG
	(Typed or printed name of person signing)
	President
	(Title of person signing)