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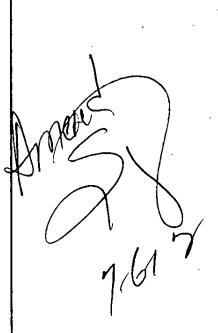
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PICK-UP	☐ WAIT	MAIL MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Division of Corporations NAME OF CORPORATION: BMI Ventures Inc. DOCUMENT NUMBER: P10000018195 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Christopher M. Ninos Name of Contact Person BMI Ventures Inc. Firm/ Company 1801 South Federal Highway Suite #245B Delray Beach, Florida 33483-3335 City/ State and Zip Code chris@bmielite.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Christopher M. Ninos at (561) 330-6666 Ext #309

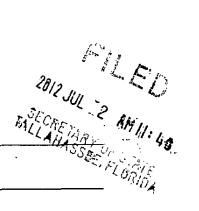
Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address**

TO: Amendment Section

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**



BMI Ventures Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000018195

(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendments Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The ne
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. Ye
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 address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address: , Florida,
(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Pagistered 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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	VTD	Daniel Lansman	11240 North West 27th Court Plantation, Florida 33323
2) Change Add Remove	SD	Brandon Rosen	741 Coventry Street Boca Raton, Florida 33487
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

	. (Be specific)			
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provisions for implementing the am	change, reclassif nendment if not o	ication, or canc	ellation of issue amendment its	<u>d shares,</u> elf:
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provisions for implementing the am	change, reclassif nendment if not o	ication, or canc	ellation of issue amendment its	d shares,

The date of each amendment(s)	adoption: June 26th 2012
Effective date if applicable:	lune 26th 2012
	(no 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	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided f	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)
	(voting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
_{Dated} June	26th 2012
Signature (Pur	
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court printed fiduciary by that fiduciary)
	Brandon Rosen
	(Typed or printed name of person signing)
	President
	(Title of person signing)