Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN B.E.D. EQUITIES INC.

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Certificate of Status	0
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12/29/11

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December 28, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

B.E.D. EQUITIES INC. 2100 SALZEDO STREET 202 CORAL GABLES, FL 33134US

SUBJECT: B.E.D. EQUITIES INC.

REF: P11000016509

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The current name of the entity is as referenced above. Please correct your document accordingly.

PLEASE REMOVE THE "COMMA" AFTER THE WORD "EQUITIES" IN THE CORPORATE NAME.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II FAX Aud. #: H11000302184 Letter Number: 711A00028801

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Articles of Amendment to Articles of Incorporation of

B.E.D. Equities Inc.

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

P11000016509

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607 1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation.

Α.	If amending	name, ent	er the new	name of th	e corporation:

The new 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 "Cv". 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)

235 Altara Avenue Coral Gables, Florida 33146

C. Enter now mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)

235 Altara Avenue Coral Gables, Florida 33146

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

___Andrew B. Hellinger

235 Altara Avenue, Coral Gables, FL 33146

(Florida street address)

New Registered Office Address

Coral Gables,

....... 33146

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered ozent of am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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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 = Chairmon 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: <u>X</u> Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
Change Add X Remove	Р	Armando C. Perez	2100 Salzedo Street, Suite 202 Coral Gables, Florida 33146
2) Change X Add Remove	<u>P</u>	Coralee G. Penabad	235 Altara Avenue Coral Gables, Florida 33146
3) Change Add Remove	,		
4) Change Add Remove			
5) Change Add Remove	·		
δ) Change Add Remove			<u> </u>

amending or adding additional Artitach additional Artitach additional sheets, if necessary).	(Be specific)		
	<u> </u>		
			
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	,		
	,		
an amendment provides for an excl	nange, reclassification, :	or cancellation of issued shares	
rovisions for implementing the ame	ndment if not contained	d in the amendment itself:	•
(if not applicable, indicate N/A)			
			······································
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The date of each amendment(s) adoption: July 20, 2011
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voling group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adapted by the incorporators without shareholder action and shareholder action was not required. Dated Signature By a director, president 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)
 Coralee G. Penabad
(Typed or printed name of person signing)
President

(Title of person signing)