## P110000005794

(Re	equestor's Name)	
( <b>A</b> d	ldress)	
(Ad	ldress)	·
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	
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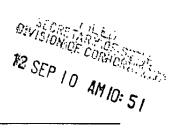
Amend 10911212

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BENYE	SHOES AND	DESIGN INC.
DOCUMENT NUMB	ER: P11900	065794	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
_	Luis	Benitet	
		Name of Contact Person	n
	BENYZJH	Firm/ Company	GN INC.
•		Firm/ Company	
·	213 5.	FEDERAL H	that I
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		REACH FL City/ State and Zip Cod	
		City/ State and Zip Cod	e
	benyzsho	es egmail.  sed for future annual report	60M
	E-mail address: (to be us	sed for future annual report	notification)
	concerning this matter, pleas		ر د د د د د د د د د د د د د د د د د د د
Name o	f Contact Person	at ( 301	de & Daytime Telephone Number
, and		,, , , , , , , , , , , , , , , , , , , ,	do de isayame reseptione i tambét
Enclosed is a check for	the following amount made	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)
<u>Mail</u>	ing Address		Address
	ndment Section sion of Corporations		Iment Section
	Box 6327		on of Corporations Building
Talla	hassee, FL 32314	2661 E	executive Center Circle
		Tallaha	assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Benyt stoes and Delign Inc	- /
(Name of Corporation as currently filed with the Florida Dept. of State)	
911000065794	
(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 its Articles of Incorporation:	amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the about "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must convert word "chartered," "professional association," or the abbreviation "P.A."	breviation
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. 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 BALBILA MEACNORSKY  1145 NORMANDY Dr. 4402  (Florida street address)	
New Registered Office Address: Miani Seach , Florida 33141 (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 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)

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.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Saily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change		DARBARA MAGNORSKY	11th NORMANDY Dr.
X Add			4-2
Remove ·			Myani BERCH, FL 3314
2) Change		<del></del>	
Add			
Remove			
3) Change	<del></del>		
Add			
Remove			
4) Change			<del></del>
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Remove			
5) Change			<del></del>
Add			
Remove			
6) Change		_	
Add			
Remove			

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lf an amendment provid	des for an exch	ange, reclassif	fication, or	cancellatio	n of issued sh	nares,
provisions for impleme	enting the amer	ndment if not o	<u>contained i</u>	n the amen	dment itself:	
(if not applicable, in	naicate N/A)		الم	1 ,	·	1-0
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and Barba	na Mo	Avoir	ey.			
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The date of each amendment(s) adoption: 09/04/12
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 cast 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"  (voting group)
(voting 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 adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_09/06/12.
Signature  (Dy a director, president or other officer – if directors or officers have not been celected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Typed or printed name of person signing)
President
(Title of person signing)