P11000095616

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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Best Value Hedias Group Corp. DOCUMENT NUMBER: P 11000095616.
DOCUMENT NUMBER: 1 17 00 () 0 10 ;
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JUAN Perez/Alfredo Hiller Name of Contact Person
Name of Contact Person Best VAIVE
Firm/ Company
<u>8433 S. US1, </u>
Port Saint Lucie / F/ 34952. City/ State and Zip Code
City/ State and Zip Code
Alfredo. Hiller D bestvalue Hediagroup. com. E-mail address: (to be used for future annual report notification)
2 man danisti (et et alea ioi intali daniam report nominamon)
For further information concerning this matter, please call:
Juan Perez at 772 9852226 Name of Contact Person Area Code & Daytime Telephone Number
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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

to
Articles of Incorporation
of

Best Value Media Group Corp.	_
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followin its Articles of Incorporation:	g amendment(s) to
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the a "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must word "chartered," "professional association," or the abbreviation "P.A."	_The new bbreviation contain the
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)	12 HAR 26
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:	CORPORATION AND A PH 1:
Name of New Registered Agent (Florida street address)	19
New Registered Office Address:, Florida, City) (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.

Example: X Change	PT John	<u>Doe</u>			
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>			
X Add	SV Sally	Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) Change Add Remove	VP	gustavo	Monaco	1564 SE Roya/ green cir # 010 PSL, Fl 34952	04
2) Change Add X Remove	<u>vp</u>	PATÉ, cia	Heinz	2491 SW CAMED L PSL, FI 34953.	3lva
3) Change Add Remove					
4) Change Add Remove					
5) Change Add Remove	<u> </u>				
6) Change Add Remove	/				

. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)			
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		····		
If an amendment provides for an exch	ongo voglassifie	a4:au au aanaall	lation of increal of	
provisions for implementing the amer	idment if not co	ntained in the a	mendment itself:	iares,
(if not applicable, indicate N/A)				_
				
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The date of each amendment(s)	adaption: 22/03/12.
Effective date <u>if applicable</u> :	NOW 22/03/12.
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 as by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved 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 cas	st for the amendment(s) was/were sufficient for approval
by	99
• • •	(voting group)
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated	3-22/12
Signature	Just
(Вуд	director, president or other officer – if directors or officers have not been ted by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
	TUAN Perez (Typed or printed name of person signing)
	PresidenT.
	(Title of person signing)