P11000109304

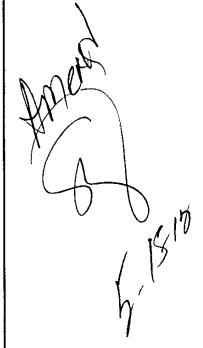
(Req	uestor's Name)	·····
(Add	ress)	
(Add	ress)	,
(City	/State/Zip/Phone	e #)
. PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer:	

Office Use Only



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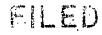


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	BETTER FI ER: P1100010930	IREARMS DESI 4	GNS, INC
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	CLIFFORD H BE	NJAMIN, JR	
-		Name of Contact Person	
-		Firm/ Company	
	739 MASON AVE		
-		Address	
	DAYTONA BEAC	H, FL 32117	
-		City/ State and Zip Code	
191	1GASGUNS@GI	MAIL.COM	
	E-mail address: (to be us	ed for future annual report	notification)
	•		There is not an incident the second s
For further information	concerning this matter, pleas	e call:	
MARIE BENJ	JAMIN	at (386	257-9000
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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)
Ame Divis P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation



2012 MAY 11 AM 5: 15

BETTER FIREARMS DESINS, INC

P11000109304

(Document Number of Corporation (if known)

idment(s) to

	the corporation:	
I/A		Th
ame must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation ord "chartered," "professional association," ("Corp," "Inc," or "Co". A p	
Enter new principal office address, if appl		
rincipal office address <u>MUST BE A STREE</u>	T ADDRESS)	
	 .	
Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>	
. If amending the registered agent and/or re		rida, enter the name of the
new registered agent and/or the new regis	tered office address:	rida, enter the name of the
	tered office address:	orida, enter the name of the
new registered agent and/or the new regis	stered office address:	
new registered agent and/or the new regis	tered office address:	
new registered agent and/or the new regis	tered office address: (Florida street address) , Florida
new registered agent and/or the new regis Name of New Registered Agent	stered office address:)
new registered agent and/or the new regis Name of New Registered Agent	tered office address: (Florida street address) , Florida

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> <u>Jo</u>	ohn Doe	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) XX Change Add Remove	VP/S/T	DEBRA M BENJAMIN	739 MASON AVE DAYTONA BEACH, FL. 32117
2) xx Change Add Remove	CEO/P	CLIFFORD H BENJAMIN JR	739 MASON AVE DAYTONA BEACH, FL 32117
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
ARTICLE IV
CHANGE AUTHORIED NUMBER OF SHARES FROM
20,000,000 TO 100,000,000 SHARES
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

The date of each amendment	(s) adoption: 05/01/2012
Effective date if applicable:	05/01/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
_{Dated} 05/0	01/2012
Signature	Dobra M. Brigamin
se	y a director, president or other officer—If directors or officers have not been elected, by an incorporator—if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	DEBRA M BENJAMIN
	(Typed or printed name of person signing)
	VP/S/T
	(Title of person signing)