P12000065219

(Re	questor's Name)	
- (Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
. (Bu	siness Entity Nai	me)
(Do	cument Number)	
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: BLUE VALLEY CONSULTANTS INCOMMENT NUMBER: P12000065219
1
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
HAZEL MARINO Name of Contact Person
BLUE VALLEY CONSULTANTS INC.
440 5, ANDREWS AUFNUE Address
HUUS, ANDREWS AUFNUE Address FORT LBUDER DALES FL: 33484 City/State and Zip Code
TMINTERNATIONAL COUNSEL & 6 MAIL. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please valle.
Name of Contact Person at (561) 245-77/3 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 Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Matting Address

TO: Amendment Section

Mailing Address
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

BLUE VALLEY	CONSUL	LANTS, INC	•
(Name of Corporation as currently	y filed with the Florida De	pt. of State) /	
P12000065	5219		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida P</i>	rofit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			The new
name must be distinguishable and contain the value "Corp.," "Inc.," or Co.," or the designation "Coward "shartared" "professional association " or A	orp," "Inc," or "Co". A	pany," or "incorporated" or to professional corporation name n	he abbreviation
B. Enter new principal office address, if applica			
(Principal office address MUST BE A STR.EET A.	DDRESS)	:	
•	,,,,, -, ,		AC A
	. 		- 13 S
C. Enter new mailing address, il applicable:			
(Malling address <u>MAY BE A POST OF FICE I</u>	<u>BOX</u>)		
		,	T PH
			1 %
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D. If amending the registered agent and/or regis		rida, enter the name of the	
new registered agent and/or the new registere	ed office address;		
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·		
•			
	(Florida street addres:	s)	
New Registered Office Address:		. Florida	
TOW HOZISHOPOW OFFICE FLOW COS.	(City)	(Zip Code)
			•
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		ccept the obligations of the positi	ion.
Signature of	New Registered Agent, if ci	hanging	

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 <math>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 Do	не	
X Remove	V Mike Jo	<u>ines</u>	
X Add	SV Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PRESTAENT	JOHN MARIND	6461 N.W, ZND AVEND
Add			APT # 201
Remove			BOCA RATINSFL 3348
2) Change	PRESIDENT	HAZEL MARINO	6461 N.W. ZND AVENUE
Add			APT 201
Remove			BOCA RATON, FL 3348
3) Change			
Add			
Remove			
4) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			
5) Change			
Add			
Remove			
6),Change			
Add			
Damova			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) ANEND ARTICLE VII
ARTICIE VII
TITLE PRESIDENT
REMOVE JOHN MARIND
THE MODE JOHN MAKIND
PUT HAZEL MARINO
PRESIDENT
6461 N.W. DND AVE, #201
BOCA RATEN, FL 33487
·
F. If an amendment provides for an exchange, recfassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
•

The date of each amendment(s) adoption: SEPTEMBER 19,2012
Effective date if applicable: SFPTFNBER 19,2012 (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK QNE)
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) were sufficient for approval / 00 0
by ANTHONY STANGO HAZEL MARIND." (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 9/19/12 Signature X Hazel Marino
(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)
THAZEL MARINO (Typed or printed name of person signing)
Title of person signing)