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COVER LETTER

TO: Amendment Section Division of Corporations	•
NAME OF CORPORATION: Bhy m	i Petroleun Inc.
	722433
The enclosed Articles of Amendment and fee are subt	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
	Name of Contact Person
1000 (2003	Firm/Company Winol Levelang FT. Walton FL-3254= Address
	32547
	City/ State and Zip Code
E-mail address: (to be use	d for future annual report notification)
	,
For further information concerning this matter, please	call:
Mehul Patal	at (969) 809 7045
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

•	Articles of A to Articles of In	corporation		2013 140 516
Bhymi	Petrolen		C	ALLANDEN PI
(Name of Corporation as	currently filed with the I	Florida Dept. of Stat	<u>(e)</u>	SSECOL
	022433			
(Document	Number of Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corpo	oration adopts the f	following amendment(s)
A. If amending name, enter the new na	me of the corporation:			
				The new
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associate B. Enter new principal office address, i (Principal office address MUST BE A ST	ition "Corp," "Inc," or 'ion," or the abbreviation [applicable:	"Co". A professiona	ıl corporation nam	
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O				
D. If amending the registered agent and new registered agent and/or the new Name of New Registered Agent			er the name of the	
	(Florida st	reet address)		
New Registered Office Address:	(City)	_, Florida(Zip C	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.

Mike Jones, V as Ren	iove, and Sally Smith	SV as an Add.	·
Example: X Change	PT John D	<u>Ooc</u>	
X Remove	V Mike J	<u>ones</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	VP.	Rekhabens-Pati	3035-N. Waters7
Add		•	Decentur IL-12526
2 Remove			
2) Change	Treate	Patel Mehnl Kumar	
Add			Dearth Il 62526
<u> </u>		P. 15 11	
3)Change	France	1044. Jay zshkumu	Fron N. Dirkson Prway Spring Fredd IL-62702
Add			Shund trade
Remove			
4) Change			
Add			
Remove			
5) Change		- 1979 from the state of the st	
Add			
Remove			
6) Change			
Add			
Remove			

uach <i>auaitionai she</i>	ng additional Art tets, if necessary).	(Be specific)			
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			·		
	· · · · · · · · · · · · · · · · · · ·			·	- 4
					
					
					
an amendment pro	ovides for an exc	hange, reclassi	fication, or can	cellation of iss	ued shares,
rovisions for imple	ementing the amo	endment if not	contained in th	e amendment	itself:
(if not applicable	e, maicale N/A)				
					
					
					
				····	

The date of each amend	ment(s) adoption: 5/21/13
Effective date if applica	ble:
	(no more than 90 days after amendment file date)
Adoption of Amendmen	t(s) (<u>CHECK ONE</u>)
The amendment(s) wa by the shareholders w	s/were adopted by the shareholders. The number of votes cast for the amendment(s) vas/were sufficient for approval.
the amendment(s) wa must be separately pr	s/were approved by the shareholders through voting groups. The following statement vovided 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) wa action was not require	s/were adopted by the board of directors without shareholder action and shareholder d.
The amendment(s) wa action was not require	s/were adopted by the incorporators without shareholder action and shareholder d.
Dated_	03-21-13
Signato	tre
	selected, 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)
	(Typed or printed name of person signing)
	President
	(Title of person signing)