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R. WHITE MAR 0 4 2020 2020 FED 1 0 1/1 10: 4:0

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	n: <u>bella's Co</u>	nsulming lorp			
DOCUMENT NUMBER: _	0, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
The enclosed Articles of Amo	endment and fee are su	bmitted for filing.			
Please return all corresponde	nce concerning this ma	tter to the following:			
	Isak	sel thijillo			
-		Name of Contact Person	1		
	B 811 a.	s Consulting La	mP		
<del></del>		S Consulting Lo Firm/Company			
2444 W 74 St. Address					
	Halpah	FL 3301LP City/ State and Zip Code			
		City/ State and Zip Code	<u> </u>		
	Be/I	\$218@ Me.com	^		
E		ed for future annual report			
Profesion Control		.,			
For further information conce	rning this matter, pieas	se can:			
tsabel	Mj:110	at (_ 205	de & Daytime Telephone Number		
Name of Cont	act Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the fo	llowing amount made [	payable to the Florida Depa	artment of State:		
	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## **Articles of Amendment**

to
Articles of Incorporation

of

P-1/10 S CONSI		U(P	2020 ET	3 10 1410: h0	
P13ccOt		iy meu wan i		ni or state)	
	ment Number o	of Corporation	(if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this	Florida Profi	it Corporation a	idopts the following	, amendment(s) to
A. If amending name, enter the new name of the c	orporation:				
Bella's Consulting Free name must be distinguishable and contain the word "c					The new
name must be distinguishable and contain the word "c" ["Inc.," or Co.," or the designation "Corp.," "Inc., "chartered," "professional association," or the abbra	" or "Co" z	A professiona	"incorporated" l corporation i	or the abbreviation on the must contain	i "Corp.," the word
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		NIA			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	1Y)	NA			
(Maning utairess MAT BE AT OST OT THE BE	<u> </u>				
D. If amending the registered agent and/or registered new registered agent and/or the new registered			a, enter the na	me of the	
Name of New Registered Agent	MA				
<del></del>	(Florida str	reet address)			
New Registered Office Address:				Florida	
		(City)		(Zip Ce	ode)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	gistered Agent I am familiar i	:: with and accep	ot the obligation	ns of the position.	
Sign	ature of New R	Registered Age	nt, if changing		

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		<del>_</del>	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
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51 Change			
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6) Change			
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f an amend	lment provides f	or an exchange	. reclassificatio	n or cancellati	ion of issued shar	rec	
provisions	for implementin	g the amendme	nt if not conta	ined in the ame	endment itself:	1.431	
(if not a	applicable, indica	ite N/A)	_				
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:	2/4/20	
	14120 tno more than 90 days after amendment file da	rte)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requiremed epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes east for the a sufficient for approval.	imendment(s)
	proved by the sharcholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated	2/4/20 supel-rufillo	
Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	who I raillo	
(By a selected	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, outed fiduciary by that fiduciary)	
	TSADEL TRY:110 (Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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