P14000002156

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Capaigl Instructions to	Ciling Officer	
Special Instructions to	Filing Officer.	
:		

Office Use Only



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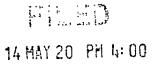
JUN 0 **3** 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BLUELIGH	T HOLDINGS IN	1C	
DOCUMENT NUMI	D440000004E			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	SAUL SUAREZ			
		Name of Contact Persor	1	
	BLUELIGHT HOL	LDINGS INC		
		Firm/ Company		
	310 FONTAINEB	LEAU BLVD AP	T 503	
		Address		
	MIAMI, FLORIDA	33172		
	**************************************	City/ State and Zip Code		
SS	UAREZ613@GM	All COM		
	_	sed for future annual report	notification)	
Can Contland in Comments				
r or turmer informatio	n concerning this matter, pleas	se can:		
SAUL SUAR	EZ	_{at (} 786	, 326-7110	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)	
Mailing Address Amendment Section		Ameno	Address Iment Section	
	ision of Corporations	Division of Corporations		
	. Box 6327 lahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
1 4411		Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation



HEADLIGHT POWER POLISH INC

(Name of Corporation as currently filed with the Florida Dept. of	State) Sandian Sandian
P1400002156	TALLAHASSEE, FLOROA

ent(s) to

(Document Numbe	r of Corporation (if I	(nown)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Fi	orida Profit Corporation adopts the following	owing amendm
A. If amending name, enter the new name of the BLUELI	<u>e corporation:</u> GHT HOLDI	NGS INC	The ne
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp," "Inc." or "C	o". A professional corporation name n	he abbreviatio
B. Enter new principal office address, if applicable:		310 FONTAINEBLEAU BLVD	
(Principal office address MUST BE A STREET A		APT # 503	
		MIAMI, FL. 33172	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<i>BOX</i>)	"SAME AS ABOVE"	
D. If amending the registered agent and/or regi	stered office addre	s in Florida, enter the name of the	
new registered agent and/or the new register Name of New Registered Agent	red office address: N/A		
Nume of New Negistered Agent	N/A		
	(Florida stree	t address)	
New Registered Office Address:		, Florida	
	(City)	(Zip Code	?)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen		h and accept the obligations of the posit	ion.
Signature o	f New Registered Ag	ent, 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 <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	<u>PT</u>	John Do	<u>e</u>	
X Remove	V	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		
Add Add				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	N/A
	u.
·	
'. If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	-nament it not contained in the Amendment Racit.
	N/A

The date of each amendment(s) adoption	on: MAY 13, 2014	_, if other than the
date this document was signed.		
Effective date if applicable:	MAY 13, 2014	_
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the amendment(s) nt for approval.	
	by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	
"The number of votes east for th	e amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
action was not required. Dated MAY 13, 20		
Signature		
(By a directo selected, by	or, president or off officer – if directors or officers have not been an incorporator of in the hands of a receiver, trustee, or other court duciary by that fiduciary)	_
•	SAUL SUAREZ	
	(Typed or printed name of person signing)	_
	PRESIDENT (E)	
	(Title of person signing)	AN 20 PM 4: 00
		100 m