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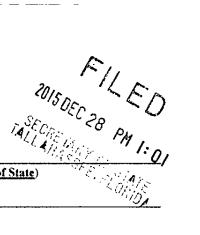
COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	FION: BELLI ARCHITE	CTURE AND DESIGN, CO	ORP.
DOCUMENT NUMBER	R:		· · · · · ·
	Amendment and fee are su	bmitted for filing.	
Please return all correspon	ndence concerning this ma	tter to the following:	
		FERNANDO VALDES	
		Name of Contact Persor	1
		FERNANDO E. VALDES	, P.A
		Firm/ Company	
	1070	5 NW 33RD STREET SUI	TE 100
		Address	
		DORAL, FL 33172	
<u> </u>	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	3
	VALDI	ESFERNANDO@BELLSO	OUTH.NET
	E-mail address: (to be us	sed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
FERNANDO VALDES		at (305	588-1618 de & Daytime Telephone Number
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	urtment 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



BELLI ARCHITECTURE AND DESIGN, CORP.

(Name of Corporation as curre	
	ntly filed with the Florida Dept. of State)
P14000	0031233
(Document Number	er of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	nis Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the corporation:	
ANTINI GROUP, INC.	The new
ame must be distinguishable and contain the word "corporate Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or ord "chartered," "professional association," or the abbreviation	ttion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	2310 NW 2nd AVENUE MIAMI, FL 33127
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2310 NW 2nd AVENUE MIAHI, FL 33127
If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	ddress in Florida, enter the name of the ress:
TATELOUS CONTRACTOR CO	
THE PARTY OF THE P	
	street address)
	street address)

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 Do	<u>c</u>	
X Remove	<u>V</u>	Mike Jos	<u>nes</u>	
X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1)Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		-
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)
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	The state of the s
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
If an amendment provides for an exc provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
If an amendment provides for an exc provisions for implementing the amo (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

	DECEMBER 4th, 2015	
The date of each amendment(s) a	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	12/31/15	
<u> </u>	12/31/15 (no more than 90 days after amendment file	date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the fficient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The folioneach voting group entitled to vote separately on the amen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action a	and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and s	shareholder
DatedSignature	BER 7th, 2015	
(By a d	irector, president or other officer – if directors or officers I d, by an incorporator – if in the hands of a receiver, trustee led fiduciary by that fiduciary)	
	PIERO BELLI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	