P14000062492

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: J&KBEE	S, INC.			
DOCUMENT NUMBER: P14000062492				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this matter to the following:				
LAZARO GONZ	ALEZ			
	Name of Contact Person	n		
J & K BEES, INC				
	Firm/ Company			
23925 TINAS LN				
	Address			
FORT MYERS,				
	City/ State and Zip Cod	e		
TAXSERVICES2010	O@HOTMAIL.CC	DM,		
	ised for future annual report	notification)		
For further information concerning this matter, plea	· · · · · · · · · · · · · · · · · · ·			
For turther information concerning this matter, pie	ise call:			
VLADIMIR GOMEZ	at (239	, 565-9973		
Name of Contact Person		de & 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	□\$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	Street	Address		
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			

Clifton Building
2661 Executive Center Circle
Tallahassee; FL 32301

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment ,to Articles of Incorporation of

J & K BEES, INC.		
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
P14000062492		
(Document Number of Corporation (if k	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	Iorida Profit Corporation adopts the following ar	nendment(s) to
A. If amending name, enter the new name of the corporation:	5 5	100 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
G.T.L. BEES, INC.	22	re inew
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	" "company," or "incorporated" or the abby o". A professional corporation name must con	eviätion tain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1417 SW 9th CT CAPE CORAL, FL 33991	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent N/A	ss in Florida, enter the name of the	
(Florida street New Registered Office Address:	t address), Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with Signature of New Registered Agent		

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.

Example: <u>X</u> 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>	Name	<u>Addres</u> s
1) Change	VP	YOANDRY DUMENIGO	23925 TINAS LN
Add			FORT MYERS, FL 33913
Remove			
2) Change	S	DOMINGO J. GONZALEZ	23925 TINAS LN
Add			FORT MYERS, FL 33913
Remove			
3) Change	<u>T</u>	JORGE Y. TORRES	23925 TINAS LN
Add			FORT MYERS, FL 33913
Remove			
4) Change	VP	VLADIMIR GOMEZ	1417 SW 9th CT
✓ _ ∧dd			CAPE CORAL, FL 33991
Remove			
5) Change	S	BARBARO SUAREZ	1558 GEORGE TOWN DR
✓ _Add			LAKELAN, FL 33811
Remove			
6) Change	and the second		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:				
(Attach additional sheets, if necessary). (Be specific)				
N/A				
				
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:				
(if not applicable, indicate N/A)				
N/A				

The date of each amendment(s) adoption: 11/18/2014	, if other than the
date this document was signed.	
Effective date if applicable: 11/18/2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. 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) was/were sufficient for approval	
by"	
(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_11/18/2014	
Signature	
(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)	
LAZARO GONZALEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	