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TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: B&M SHINE COR	RP	
DOCUMENT NUMB			
	f Amendment and fee are sul	bmitted for filing.	
Please return all corresp	ondence concerning this ma	ter to the following:	
9	SHIRLEY ALMAZAN		
-		Name of Contact Person	
-	TOYOS TAX SERVICE INC	;	
-		Firm/ Company	
•	7264 SW 8TH STREET		
-		Address	
]	MIAMI, FL 33144		
-		City/ State and Zip Code	<u> </u>
	TOYOS.TAX.SERVICE@M	SN.COM	
-	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
SHIRLEY ALMAZAN		786 at (_) <u>536-4647</u> _)
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
S35 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)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee 3. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

B&M SHINE CORP.

DKINI SI	IINE CORP.
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P1400	00070095
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>ı:</u>
	The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp." "Inc." or "Co" "chartered," "professional association," or the abbreviation "F B. Enter new principal office address, if applicable:	" "company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	75
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	SSEE FLETCH
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Floria	la street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Aftereby accept the appointment as registered agent. I am famili	
Signature of Ne	rw Registered Agent, if changing

Check if applicable

☐ 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)

Example:

Please note the officer/director title by the first letter of the office title:

 $P \neq President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	MAYLIN BATISTA DONERIZ	20464 SW 128TH AVE
Add			MIAMI, FL 33177
X Remove			
2) Change		_	
Add			7022 .
Remove 3.) Change			JUN TI
Add			
Remove			
4) Change			一般である。 25
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)			
N/A			
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f 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)			
NIA			
			_

	06/08/2022	
The date of each amendment(s)	adoption:	
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment	(file date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	lopted by the incorporators, or board of directors witho	out shareholder action and shareholder
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east fulficient for approval.	
must be separately provided fo	oproved by the shareholders through voting groups. The each voting group entitled to vote separately on the act for the amendment(s) was/were sufficient for approve	mendment(s): TAHASSE
Dated	(voting group) (a/8/b) 3. director, president or other officer – if directors or officer.)	ers have not been
appoi	ed, by an incorporator – if in the hands of a receiver, trunted fiduciary by that fiduciary)	istee, or other court
	FRANCISCO BACALLAO LEON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	