P15000004170

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(City/State/Zip/Phone #)				
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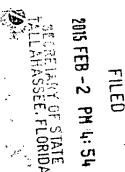
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2/4/15

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: BMF Benef	it Group Inc.			
DOCUMENT NUMB	ER: p1500000417	0			
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	ondence concerning this ma	tter to the following:			
	Brandon Diggs				
-	Name of Contact Person BMF Benefit Group Inc.				
-	3407 Willowwood	Firm/ Company I Rd.			
•	Lauderhill, FL. 33	Address 3319			
-		City/ State and Zip Code	2		
bdig	gs1988@yahoo.				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Frank Mirand	0	_{at (} 754	₎ 245-1087		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	ertment of State:		
■ \$35 Filing Fec	☐\$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 2661 H	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of

FILED

BMF Benefit Group Inc.	2015 FEB - 2 PM 4: 5	4
(Name of Corporation as currently filed with the Florida Dept. of Sta	ILE) SECRETARY OF STATE	<u> </u>
p15000004170	TALLAHASSEE, FLURIL	JA
(Document Number of Corporation (if known)	alasti ares	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation:	noration adopts the following amends	ment(s)
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "company," o "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profession word "chartered," "professional association," or the abbreviation "P.A."		ion
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address in Florida, ent new registered agent and/or the new registered office address: Name of New Registered Agent	ter the name of the	
Name of New Registered Agent		
(Florida street address)		
New Registered Office 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 and accept the	obligations of the position.	

Signature of New Registered Agent, 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 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>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Address</u>
1) Change	S, D		Brandon L. Diggs	3407 Willowwood rd.
Add				Lauderhill, FL 33319
Remove				
2) Change	S		B Diggs Consulting Inc.	2918 NW 130th Ave #103
✓ Add				Sunrise, FL. 33323
Remove				
3) Change	,	_		
Add				
Remove				
4) Change	···			
Add				
Remove				
5) Change	<u></u>			
Add				
Remove				
6) Change				
Add				
Remove				

tach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
·	
an umendment provides for an exc	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes east fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated 01/26/20	15	
Signature B	mh Dil	
selected.	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court and fiduciary by that fiduciary)	
f	Brandon Diggs	
-	(Typed or printed name of person signing)	
\$	S, D	
-	(Title of person signing)	-