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TO ACKNOWLEDGE TO ACKNOWLEDGE

5 NOV 30 PM 1: 3

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A RAMSEY

COVER LETTER

Division of Corporations
NAME OF CORPORATION: BENDEH! R.E. INC., DOCUMENT NUMBER: P150000 23999
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Robert E BENDEH! Name of Contact Person BENDEH! R. E. INC Firm/ Company 10165 MAC and Address Address Address City/ State and Zip Code F-mail address: (to be used for future annual report notification)
. For further information concerning this matter, please call:
ROBERT BENDETTIAL 904 891-4920 Name of Contact Person Area Code & 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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

FILED

BENDETT!	RE	S IN CALL NO. 3	0 PM 1:38
	oration as currently filed	vith the Florida Dept. of	PStale) STALE SEE, FLORIDA
(De	ocument Number of Corpor	ration (if known) &	2.15
Pursuant to the provisions of section 607.1006, FI its Articles of Incorporation:	lorida Statutes, this <i>Florida</i>	Profit Corporation adopt	ts the following amendment(s)
A. If amending name, enter the new name of the	he corporation:		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A		
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET		·	
 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or regnew registered agent and/or the new registered. 	gistered office address in l	lorida, enter the name c	of the
new registered agent and/or the new registr	ered office address:		
Name of New Registered Agent	<u></u>		
	(Florida street addr	ess)	
New Registered Office Address:		, FI	orida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		l accept the obligations of	the position.
	Signature of New Registers	ed 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:	, una sa	my Smith, Sr us un Auu.
X 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)	Title	Name Address
1) Change	7	Robert BENDETTI 1065 MACON 16 JOY FLA 3221
Add	•	164 FLA 3221
Remove		σ, · · · · · · · · · · · · · · · · · · ·
2) Change		
Remove		
3) Change		
Add		· · · · · · · · · · · · · · · · · · ·
Remove		
4) Change		
Add		
Remove		
5) Change		·
Add		·
Remove		
6) Change		
Add		
Remove		

ttach additional sheets, if necessary).	(Be specific)	
		
		
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an amendment provides for an exch	ange, reclassification, or cancellation of issued sh	ares,
orovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(g not applicable, malcule WA)		

The date of each amendment(s) adoption: 11-30-15 date this document was signed.	, if other than the
· ·	·
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as th
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 $1130-15$	
Signature Role & Bon Do Ktu	
(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)	
Robert & BENDETT' (Typed or printed name of person signing)	
President	
(Title of person signing)	