

P 16000005641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

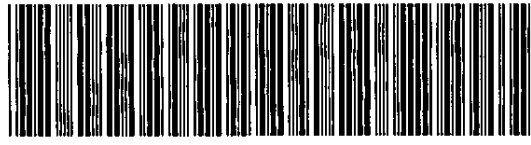
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

JUL 27 2016
D CUSHING



July 13, 2016

Via: U.S. Priority Mail
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Document Number: P16000005641 - Amendment

Regarding the above-referenced matter, enclosed please find:

- Two (2) originals of the Articles of Amendment to Articles of Incorporation of BHB Investments, Inc.
- Check Number 3923 in the amount of \$52.50 for filing fees as follows:


○ Filing Fee	\$35.00
○ Certified Copy	\$ 8.75
○ Certificate of Status	<u>\$ 8.75</u>
TOTAL DUE	\$52.50

Once the document has been filed, please return the Certified Copy and Certificate of Status to this office in the self-addressed pre-paid envelope provided.

PLEASE DO NOT RETURN THE DOCUMENTS IF YOU ARE UNABLE TO FILE. Please call me as soon as possible to correct the problem. You may call me at (407) 647-3428, extension 100. Thank you for your prompt attention to this matter.

Sincerely Yours,
Lewis & Crichton

By:


Elizabeth Hyatt
Legal Assistant

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TALLAHASSEE, FLORIDA

Enclosures as stated

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BHB Investments, Inc.

DOCUMENT NUMBER: P16000005641

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Leslie A. Lewis
Name of Contact Person

Lewis + Crichton, LLC
Firm/ Company

1801 Lee Road, Suite 100
Address

Winter Park, FL 32789
City/ State and Zip Code

llewis@lewisfirm.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Leslie Lewis at (407), 647-3428 x102
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
- \$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

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

Articles of Amendment
to
Articles of Incorporation
of

BHB Investments, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P16000005641

(Document Number of Corporation (if known))

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Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

8129 Tombstone Ct.
Unit #1021
Delray Beach, FL 33446

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

Same

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Leslie A. Lewis, Lewis + Crichton, LLC
1801 Lee Rd, #100
(Florida street address)
New Registered Office Address: Winter Park, Florida 32789
(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.

Leslie A. Lewis

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 title 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. Then 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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Bertha H. BLAU</u>	<u>6698 10th Ave N. Unit 108 Lakewood, FL 33467</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PT</u>	<u>Sheldon T. Katz</u>	<u>8129 Tumbleston Ct. Unit #1021 Delray Beach, FL 33446</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

E. **If amending or adding additional Articles, enter change(s) here:**
(Attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

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 not be listed as the document's effective date on the Department of State's records.

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):

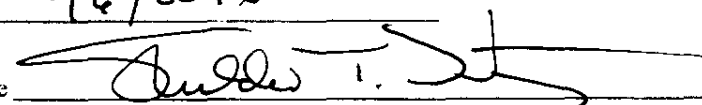
"The number of votes cast for the amendment(s) was/were sufficient for approval

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 7/6/2016

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)

Sheldon T. Katz

(Typed or printed name of person signing)

President/Treasurer

(Title of person signing)

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