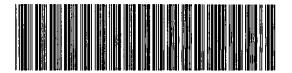
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SECRETARY OF STATE DIVISION OF CORPORATIONS

FEB 1 6 2016 CLEWIE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BCBPVB, INC			
	BER: P16000008842			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Ben C. Bishop III			
		Name of Contact Persor	1	
	BCBPVB, INC			
		Firm/ Company		
	50 North Laura Street, Suite	3625		
		Address		
	Jacksonville, FL 32202			
		City/ State and Zip Code	e	
benb	ishoppvb@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
		-		
For further information	on concerning this matter, pleas	se call;		
Ben C. Bishop III		at (982-2713	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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)	
Ma	niling Address	Street	Address	
	nendment Section		Amendment Section	
	vision of Corporations	Division of Corporations		
		Building		
Tallahassee, FL 32314		2661 E	xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

RCRPVR INC.

16 FEB 16 PM 1: 48

BCBLAB' INC
(Name of Corporation as currently filed with the Florida Dept. of State)
P16000008842
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(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)
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, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florida street address)
** New Registered Office Address: 4417 Beach Blvd., Suite 104 Jacksonville, FL , Florida , Flori
(City) (Zip Code)
*Registered Agent has not changed, Just
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)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add	·			
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
······································	

•	February 10, 2016	
The date of each amendment(s) date this document was signed.		if other than th
	ebruary 10, 2016	SECRETARY OF STATE DIVISION OF CORPORATIONS
Effective date <u>if applicable</u> :	(no more than 90 days after ame	
	(no more than 90 days after ame	16 FEB 16 PM 1:48
Note: If the date inserted in the document's effective date on the		ling requirements, this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes sufficient for approval.	s cast for the amendment(s)
	approved by the shareholders through voting group for each voting group entitled to vote separately of	
"The number of votes c	ast for the amendment(s) was/were sufficient for a	pproval
by		,,
•	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without sharehol	lder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder	action and shareholder
Februar Dated	7 10, 2016	
Signature	Ben a Rul T	TT
	a director, president or other officer - if directors	or officers have not been
	cted, by an incorporator - if in the hands of a rece	iver, trustee, or other court
app	pinted fiduciary by that fiduciary)	
	Ben C. Bishop III	
	(Typed or printed name of person s	igning)
	President	
	(Title of person signing	2)