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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	
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SECVENCE OF SALE



COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: BION UNMANGED INC
DOCUMENT NUMBER: PIGOOOIDGIT
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NAGIA BULGUSUVO Name of Contact Person
Giovannangelo Inc. Firm/Company
2218 riagewood Circle
Ryul Pulm Brach, FL 33411 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
NAIL BULLOW at VIT 155-3633 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 AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Giovannanario Inc

<u> </u>	inco nic	•		
(Name of Corpora	ation as currently f	iled with the Florida Dept	. of State)	
PHINOD	010617			
		orporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	ida Statutes, this <i>Fl</i> e	orida Profit Corporation ac	lopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Con word "chartered," "professional association," or th	rp," "Inc," or "Co	". A professional corpora		the abbreviation
3. <u>Enter new principal office address, if applicab</u> Principal office address <u>MUST BE A STREET AI</u>				·····
				<u></u>
				·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<i>BOX</i>)			
				
 If amending the registered agent and/or registered agent and/or the new registered 		in Florida, enter the nan	ne of the	
Name of New Registered Agent				
vame of New Registerea Agent				<u></u>
MATERIAL MAT	(Florida street	address)		
Now Designand Office Address	•	,	Elowido	
New Registered Office Address:	(Ci	ty)	, Florida	(Zip Code)
			524 525 625	<u>pia</u>
New Registered Agent's Signature, if changing R hereby accept the appointment as registered agent		h and accept the obligation	e of the pos	ition "Tell
петеоу ассері те арроттет аз гезіметей адет	. 1 am jamulai wu	i ana accepi ine obligation.	s of the pos	
				20
Sig	gnature of New Regi	istered Agent, if changing	SE	2
				**F

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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change			·	
Add				
Remove				
3) Change		<u> </u>		
Add				
Remove				
4) Change		_		
Add				
Remove	•			
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	sheets, if necessary). (Be specific)
whole	IV
Author	number of shares the corporation is ized to issue is 1,000,000
······································	
ovisions for it	provides for an exchange, reclassification, or cancellation of issued shares, uplementing the amendment if not contained in the amendment itself:
visions for it	
ovisions for it	nplementing the amendment if not contained in the amendment itself:
ovisions for it	nplementing the amendment if not contained in the amendment itself:
ovisions for it	nplementing the amendment if not contained in the amendment itself:
ovisions for it	nplementing the amendment if not contained in the amendment itself:
visions for it	nplementing the amendment if not contained in the amendment itself: