6/8/2018

Division of Corporations

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (859)517-5380

From:

Account Name : WESTON CORPORATE ADMINISTRATION, LLC

Account Number : 120090000072 Phone : (954)356-2905 Fax Number : (954)337-8346

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Emeil	Address:	

COR AMND/RESTATE/CORRECT OR O/D RESIGN BVS GROUP CORP

Certificate of Status	0
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Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

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Articles of Amendment to Articles of Incorporation of

BVS GROUP CORP			
	tion as currently filed with the Florida Dept, of Sir	ita)	
P16000042051			
(Dосш	ment Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	ia Statutes, this <i>Florida Profit Corporation</i> adopts th	e following amends	nesi(s) to
A. If amending name, enter the new name of the c	corporation:		
name must be distinguishable and contain the wo			ew .
"Corp.," "Inc.," or Co.," or the designation "Corp	rra corporation, company, or incorporated p." "Inc." or "Co". A professional corporation n	or ine abbreviau 2ma must contain L	on h ë
word "chartered," "professional association," or the	e abbreviation "P.A."	r	C13 C13
B. Enter new principal office address, if applicable	la.	T.53	
(Principal office address MUST BE A STREET AD	DRESS)	75-51	-r
		<u> </u>	ōĪ
			300 FT
		71 (1)	
C. Enter new malling address, if applicable;	A15	# 01 	<u> </u>
(Mailing address MAY BE A POST OFFICE B	289	211	-က ယ
		`#´`	_
		<u></u>	-
D. If amending the registered agent and/or registered agent and/or the new registered	ered office address in Florida, enter the name of the diffice address:	<u>16</u>	
Nama of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	. Florie	ia	_
NEW ARKHIPTER CHIES AND SAN.	(Clty)	(Zip Code)	-
New Registered Agent's Signature, if changing Re-	elstered Agent:		
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the	розиют.	
Sta	moture of New Revistered Agent, if changing		

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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:

<u>X</u> Change	PI	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sy</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
i)Change	MGR	CHRISTIAN SCHNEEBERGER	2225 N COMMERCE PKWY
Add			SUITE 4
X Remove			WESTON, FL 33326
2) Change	MGR	ALEJANDRO FACUNDO FAVELUKE	2225 N COMMERCE PKWY
X Add			SUITE 4
Remove			WESTON, FL 33326
3) Change			
Add			
Remove			
4)Change			
Add		•	
Remove			
() Change			
5) Change			
Add			*****
Remove			
6) Change			
Add			
Ramove			

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E. <u>If amending</u> (Attach <i>addi</i> i	s or adding addition tional sheets, if nece	nal Articles, enter chi ssary). (Be specific)	noge(s) bere:		
· · · · · · · · · · · · · · · · · · ·					
					
				W-W-	
provisions	dment provides for For implementing applicable, indicate	an exchange, reclass the amendment If not N/A)	ification, or cancel contained in the a	lation of issued shar mendment litselfi	184.
				· · · · · · · · · · · · · · · · · · ·	
			<u></u>		

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The date of each amendment(s) adoption:	, if other then the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(a) was/were adopted by the shareholders. The number of votes cast for a by the shareholders was/were sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The fit must be separately provided for each voting group entitled to vote separately on the ame	ollowing statement undment(s):
"The number of votes east 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 action was not required.	n and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	i shareholder
Dated 6916	
Signature (By a director, possident or other officer - if directors or officer	
effected, by an indorporator — if in the hands of a receiver, trust appointed fiduciary by that fiduciary)	BE, Of Builds Count
chilletian schnees	erger
(Typed or printed name of person signing)	
(Title of person signing)	
(i lic of person signific	