## P16000044724

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N: BETTER COMPA	NIES, INC.	
	16000044726		
The enclosed Articles of Ame	ndment and fee are su	bmitted for filing.	
Please return all corresponden	ice concerning this mat	tter to the following:	
HERB	ST DORNEVAL		
		Name of Contact Persor	1
BETTI	ER COMPANIES, INC	C.	
<del></del>		Firm/ Company	<del></del>
244 FI	FTH AVE SUITE # H	257	
		Address	
NEW '	YORK, NY 10001		
		City/ State and Zip Code	2
HDORNEV	AL@GMAIL.COM		
E-	mail address: (to be us	ed for future annual report	notification)
For further information conce	rning this matter, pleas	e call:	
HERBST DORNEVAL		at ( <u>347</u>	813-5254
Name of Conta	act Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the fo	llowing amount made p	payable to the Florida Depa	irtment of State:
•	\$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		Amend Divisio Clifton	Address ment Section in of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

BETTER COMPAINTES, INC.			
(Name of Corporation as currently	v filed with the Florida Dept. of State)	)	
P16000044726			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006. Florida Statutes, this Its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing amendment	t(s)
A. If amending name, enter the new name of the corporation:			
		The new	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "Inc.," or the abbreviation "In	Co". A professional corporation name	r the abbreviation	
B. Enter new principal office address, if applicable:		201	
(Principal office address MUST BE A STREET ADDRESS)	N/A	<u> </u>	77
	10//		
		္ မ်ား မြောင္း	1
C. Enter new mailing address, if applicable:	<b>1</b> / <b>2</b>	S 25 3	
(Mailing address MAY BE A POST OFFICE BOX)		my on t	
		42 42 42	
		,	
D. If amending the registered agent and/or registered office addr			
new registered agent and/or the new registered office address:	<u>.</u>		
Name of New Registered Agent	NA		
(Florida stre	et address)		
New Registered Office Address:			
	(City)	(Zip Code)	
N. Derivered Access Signature if the give Berivered Access			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		sition.	
	•		
. (			
<u>N</u>	egistered Agent, if changing		
Signature of New Ki	егімегей Адені, ії спанціпр		

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CDO	MAGDALA DORNEVAL	244 FIFTH AVE
X Add			H257
Remove			NEW YORK, NY 10001
2) Change		NA NA	
Add			
Remove			
3 ) Change		NA	
Add			
Remove			
4) Change		NA	
Add			
Remove			
5) Change		NK	
Add			
Remove			
6) Change		N/A	
Add		l	
Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
NI/A	
	_
	_
E. If an amount manifes for an auchania malaysification on consollation of issued shares	
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)	
(y not appreciate, material (n.t.)	
1 / n	

The date of each amendment(s) adopti	12/01/2012	if other than the
date this document was signed.	011:	If Other than the
-	NA	
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date nent of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	)
	d by the shareholders through voting groups. The following statement voting group entitled to vote separately on the amendment(s):	ni
"The number of votes cast for the	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	-
Signature  (By a direct selected, by appointed file.)	or, president of other officer – if directors or officers have not been an incorporator if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)  RBST DORNEVAL  (Typed or printed name of person signing)  AIRMAN  (Title of person signing)	
		FILED 2019 JAN - 3 PH 6: 42 SELANDING THE STATE TALLAHASSEE, FL