P1600064797

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: BERNYGO, COR	P					
DOCUMENT NUMB	P16000064797						
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
		JUAN B. GOMEZ GAR	CIA				
-	Name of Contact Person						
	BERNYGO, CORP.						
-	Firm/ Company						
	1350 KIRK RD						
	Address						
_	WEST PALM BEACH FL 33406						
		City/ State and Zip Cod	e				
		BERNI76.JBG@GMAI	L.COM				
	E-mail address: (to be us	sed for future annual report	notification)				
	concerning this matter, pleas B. GOMEZ GARCIA	561	729 4606				
Name o	f Contact Person	at (Area Co) de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 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

BERNYGO, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State) P16000064797 (Document Number of Corporation (if known) 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: 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." 1350 KIRK RD B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) WEST PALM BEACH FL 33406 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: JUAN B. GOMEZ GARCIA Name of New Registered Agent 1350 KIRK RD (Florida street address) WEST PALM BEACH New Registered Office Address: (City)

Signature of New Registered Agent, if changing

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

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	PT	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)	Title		Name		<u>Addres</u> s
1) x Change	РТ		JUAN B. GOMEZ GARCIA		1350 KIRK RD
Add					WEST PALM BEACH FL 33406
Remove					
2) Change				_	
Add					
Remove					
3) Change	· - · · ·	_		_	
Add					
Remove					
4) Change		_		_	
Add					
Remove					
5) Change		·····		-	
Add					
Remove					
6) Change				_	
Add					
Ramove					

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
···-		
		-
		·-·-
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
		
		_

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,	
(no more than 90 days after amendment file date,)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The followin must be separately provided for each voting group entitled to vote separately on the amendment	
"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 staction was not required.	hareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharel action was not required.	nolder
Dated	
Signature	
Signature (By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or cappointed fiduciary by that fiduciary)	not been other court
(Typed or printed name of person signing)	
(Title of person signing)	