P16000082603

(Requestor's Name)					
(Address)					
(A.11)					
(Address)					
(City/State/Zip/Phone #)					
(Gr.y/Glata/Zip/ Melle I/)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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2020 AUG 31 AM II: 18
SECRETARY OF STATE



COVER LETTER

TO: Amendment Section' Division of Corporations

NAME OF CORP	ORATION: BONA MANAGE	MENT INC			
	MBER: P16000082603				
The enclosed Articl	les of Amendment and fee are su	bmitted for filing.			
Please return all co	rrespondence concerning this ma	tter to the following:			
	STEVEN CARUSO				
		Name of Contact Perso	on .		
	MILLER & CARUSO LLC				
		Firm/ Company			
	486 N HARBOR CITY BLVD				
		Address			
	MELBOURNE FL 32935				
		City/ State and Zip Coo	le		
	melbournetaxslayer@gmail.com				
	E-mail address: (to be us	ed for future annual repor	t notification)		
For further informa	tion concerning this matter, pleas		2507704		
	<i></i>	at (<u>321</u>	2597704		
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check	for the following amount made	payable to the Florida Dep	partment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status		
Ā D P	Mailing Address Amendment Section Division of Corporations O. Box 6327 Allahassee, FL 32314	Amen Divisi The C 2415	Address dment Section on of Corporations Lentre of Tallahassee N. Monroe Street, Suite 810 lassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED,

2020 AUG 31 AM 11: 18 BONA MANAGEMENT INC (Name of Corporation as currently filed with the Florida Dept. of State)
SECRETARY OF STATE P16000082603 TALLAHASSEE, FL (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. 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) . Florida New Registered Office Address: 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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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.

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>	<u>Name</u>	<u>Addres</u> s
1) Change	S	BORIS HAVKIN	303 FLANDERS DR
X Add			INDIALANTIC FL 32903
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			·
Remove			<u></u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
() an approximation of the second	

e de la companya del companya de la companya de la companya del companya de la co

`	08/25/2020	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK_ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sharehold	der action and shareholder
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amen	dment(s)
	roved by the shareholders through voting groups. The following 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)	
·	(voting group)	
09/25/2020		
08/25/2020 Dated	2/1	
. 2		
selected	rector, president or other officer – if directors or officers have no l, by an incorporator – if in the hands of a receiver, trustee, or othed fiduciary by that fiduciary)	
	BORIS HAVKIN	
	(Typed or printed name of person signing)	1 - 2-
	PRESIDENT	
	(Title of person signing)	