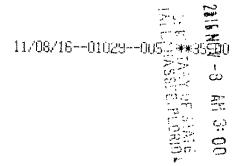
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	AIN'T MISSBEEH	IAVEN PRODUCTS, INC.		
DOCUMENT NUMBER:	P1600008846	8		
The enclosed Articles of Amend	Iment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this mat	tter to the following:		
JOHN P	MILLER			
<del> </del>		Name of Contact Person	1	
JOHN P	MILLER CPA PA			
		Firm/ Company		
2499 GL	ADES RD STE 304			
<del></del>		Address		
BOCA R	ATON FL 33431			
		City/ State and Zip Code	e	
JPMCPAPA@E	BELLSOUTH.NET			
E-ma	ail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, please call:				
JOHN P MILLER		at (561	368-9777	
Name of Contact	Person		de & Daytime Telephone Number	
Enclosed is a check for the follo	wing amount made p	payable to the Florida Depa	rtment of State:	
	3.75 Filing Fee & rtificate 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 Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, F	ection orporations 7	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

AIN'I MIS	SSBEEHAVEN PRODUCTS, INC.	
(Name of Corporati	on as currently filed with the Florida Dept.	of State)
	P16000088468	
(Docum	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporation</i> ad	opts the following amendment(s) t
A. If amending name, enter the new name of the co	orpor <u>ation:</u>	
		The. new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	," "Inc," or "Co". A professional corpora	
, projessional association, or the	1 121	
B. Enter new principal office address, if applicable		<u> </u>
(Principal office address <u>MUST BE A STREET AD</u>	DKESS )	Trace Trace
		<del>`</del> చ
		<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<b>NV</b> )	# · · · · · · · · · · · · · · · · · · ·
(Mailing dauress MAT BE A POST OFFICE BO	<u> </u>	
	<del></del>	
D. If amending the registered agent and/or registernew registered agent and/or the new registered		e of the
Name of New Registered Agent		
		<del></del>
	(Florida street address)	
Non-Bosistand Office Address		, Florida
New Registered Office Address:	(City)	(Zip Code)
		,
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<mark>zistered Agent:</mark> I am familiar with and accept the obligations	s of the position.
<u> </u>	CN. D. in and it is a second	
Sign	nature of New Registered Agent, if changing	

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PD	PA, JOHN	2349 SE MANOR AVENUE
, Add			PORT SAINT LUCIE, FL 34952
X Remove			US
2) Change	PD	FREEDMAN, BARRY	2349 SE MANOR AVENUE
X Add			PORT SAINT LUCIE, FL 34952
Remove			US
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove			

	(Be specific)		
f an amendment provides for an exc	nange, reclassification, or can	cellation of issued shares,	
f an amendment provides for an exc provisions for implementing the ame	nange, reclassification, or can indment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the amo (if not applicable, indicate N/A)	nange, reclassification, or can indment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or can ndment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or can ndment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or can ndment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cand in the name of the na	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or canonidate in the name of the second	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or can indment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or can- indment if not contained in th	cellation of issued shares, e amendment itself:	

NOVEMBER 3RD, 2016	
The date of each amendment(s) adoption:  date this document was signed.	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
NOVEMBER 3RD, 2016 Dated	
(By a director, provident or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
BARRY FREEDMAN	
(Typed or printed name of person signing)	<del></del>
PRESIDENT AND DIRECTOR	
(Title of person signing)	<del></del>