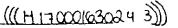


Florida Department of State

Division of Corporations Electronic Filing Cover Sheet



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Division of Corporations

Fax Number

: (850)617-6380

From:

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Account Number : I20130000083 Phone : (305)359-3700

Fax Number : (786)217-1243

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

Email Address: Master @ jpg business. com

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Corporate Filing Menu

Help

06/19/2017

13:14 PM PDT

TO:18506176380 FROM:7862171243

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COVERLETTER

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AND INVESTMENTS CO	RP
submitted for filing.	
uatter to the following:	
Name of Contact Perso	n
OLUTIONS INC	
Firm/ Company	
E, STE 1380	
Address	· · · · · · · · · · · · · · · · · · ·
City/ State and Zip Cod	е
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used for future annual report	notification)
ase call;	
at (359-3700
Area Co	de & Daytime Telephone Number
payable to the Florida Depa	artment of State:
S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio Clifton	Address Iment Section on of Corporations Building ixecutive Center Circle
	Name of Contact Perso OLUTIONS INC Firm/ Company E, STE 1380 Address City/ State and Zip Cod A used for future annual report ase call: at (305 Area Co Payable to the Florida Depa S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Amend Divisio Clifton

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FILED

Articles of Amendment

to
Articles of Incorporation

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B&C HOLDING AND INVESTMENTS CORP		ŗ	i Marian	Si no
	tion as currently filed wit	h the Florida Dept. of Spi	<u>e)</u>	<u> !\</u>
216000094739				
(Dоси	ument Number of Corporati	on (if known)		
tursuant to the provisions of section 607,1006, Florid s Articles of Incorporation:	da Statutes, this Florida Pr	ofu Corporation adopts the	following amenda	nent(s) to
If amending pame, enter the new name of the c	corporation:			
			The ne	2341
ume must he distinguishable and contain the wo Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	p." "Inc." or "Co" - 4 m	any," or "incorporated" (rofessional corporation nar	or the abbreviation	OB.
Enter new principal office address, if applicable principal office address MUST BE A STREET AD.	le: DRESS)		- Free - St. Lipy	•
				•
				-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2 V 1			
(muting uturess MAT BE A POST OFFICE BE	<u></u>			-
	·	·		_
				•
If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Flor office address:	ida, enter the name of the		
Name of New Registered Agent		•••		
	(Florida street address)		 -	
New Registered Office Address:		, Florida		
	(City)	, i fortua	(Zip Code)	-
Registered Agent's Signature, if changing Regi	istered Agent:			
eby accept the appointment as registered agent.	I am familiar with and acc	ept the obligations of the p	osition.	

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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:
(Anach 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	PI	John Doe	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
i) Change	MGR	HUGO CERQUEIRA	25 SE 2ND AVE, # 226
X Add			MIAMI FL 33131
Remove			
2) Change			
Add			
Remove			
3) Change	*******		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Chance			
Change			
Add			
Remove			

Page 2 of 4

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F If amount == :				***
(Attach oddir	or adding additional A ional sheets, if necessary	rticles, enter change(s) here:	(((117000163024	(3))
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If an amandm	ant provider for an eve	hange, reclassification, or can	saliation of issued shows	
provisions fo	or implementing the am	endment if not contained in th	e amendment itself:	
(if not ap	pplicable, indicate N/A)			
- "				

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06/1	9/2017	13:14	PM PD'	ľ	TO:18506	176380	FROM: 78	62171243 (((H17 00)1	63024	Page:
	The date of e	ench amende iment was sig	nest(s) ado med.	ption: _	XX/15/2017					_
	Effective dat	e <u>II applicat</u>	06/15/ <u>de</u> :	2017						
							amendment file			
	Note: If the document's ef	date inserted Tective date	l in this blo on the Depa	ck does	not meet the app of State's records	olicable statute	ory filing requir	cinents, this date will	l not be listed	as the
	Adoption of a	Amendment	(s)	(<u>C</u>	HECK ONE)					
	The amend by the shall	iment(s) was reholders wa	/were adopt s/were suffi	ed by th cient fo	e shareholders. " r approval.	The number of	votes cast for the	ne umendment(s)		
	The amend must be se	lment(s) was parately pro	were approvided for ea	ved by i ich votii	the shareholders to 18 group entitled	hrough voting to vote separe	groups. The fa stely on the ame	ollowing statement endment(s):		
	"The	number of v	otes cast fo	r the am	endment(s) was/	were sufficien	t for approvai			
	by _				oting group)					
				/\	oting group)					
	The amenda	not required. ment(s) was	were adopt		e board of direct			n and shareholder		
	action was r	not required. Dated	06/19							
		Signatur	(By a dire selected,	by∕an in	esident or other of corporator – if it iry by that fiduci	n the hands of	ectors or office a receiver, trus	rs have not been lee, or other court		
				_Cl	QUAIO ((Typed or prin	Agueil led name of p	erson signing)			
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