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R. WHITE
MAY 25 2018

18 MAY 24 AM 11: 00

COVER LETTER

TO: Amendment Section Division of Corporations

. .

NAME OF CORPOR	RATION: Bennett Audio Lab	, Inc.	
DOCUMENT NUMI			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	<u>Veronico</u> Bennett	Name of Contact Person	
	15033 5	Firm/Company SW 9th Ferra	ace
	miami	TI 33 194 City/ State and Zip Code	e
For further information	E-mail address: (to be us	ed for future annual report	notification)
	bënne++		523 · 3087 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 Filing Fec & Certificate of Status	□\$40.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Div P.O	endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

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FILED

18 MAY 24 AM II: 00

Bennett Audio Lab, Inc.	CIT TILLY FOLLSE
(Name of Corpo	oration as currently filed with the Floridat Dept. of State)" (10819A
P16000099508	
	Annual Muselon of Comparation (if Impum)
(Di	ocument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Flits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the	ne corporation:
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	word "corporation," "company," or "incorporated" or the abbreviation Corp," "Inc," or "Co". A professional corporation name must contain the the abbreviation "P.A."
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	E BOX)
D. If amending the registered agent and/or reg new registered agent and/or the new register	gistered office address in Florida, enter the name of the ered office address:
Name of New Registered Agent	
	(Florida street address)
	·
New Registered Office Address:	Florida
	(City) (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age	Registered Agent: ent. I am familiar with and accept the obligations of the position.
	Signature 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	PT	John Do	<u>e</u>			
X Remove	<u>V</u>	Mike Jo	<u>nes</u>			
X Add	<u>sv</u>	Sally Sn	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change	VSTD	_	Veronica Bennett		1742 S. Anhinga Lane	
Add					Homestead, FL. 33035	
X Remove						
2) Change	- ·	_		<u>.</u>		
Add						
Remove						
3) Change		_		·		_
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						_
Remove						
6) Change		_				
Add						
Remove						

Attach additional sheets, if necessary).	(Be specific)			
				
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			<u> </u>	
				_
			<u> </u>	_
	<u></u> -			
	-			
	, <u> </u>			
		<u> </u>		
If an amendment provides for an exc	hange, reclassification, or	cancellation of issu	ed shares,	
provisions for implementing the am	endment if not contained	in the amendment it	self:	
(if not applicable, indicate N/A)				

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: Way 15, 2018 (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 not be listed as th document's effective date on the Department of State's records.
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)
(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.
Dated <u>May 15, 2018</u>
Signature Bounds (By a director, president 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)
Typed or printed name of person signing)
Pres', dent