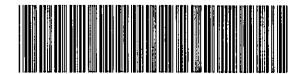
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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BECHIEVE, CORP DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Fabiola Restrepo Ramos Name of Contact Person Bechieve, Corp Firm/ Company 1087 Bryant Way Address Sunnyvale, CA 94087 City/ State and Zip Code fabiola_restrepo@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Fabiola Restrepo Ramos Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing, Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section . Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 12415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of 12

BECHIEVE, CORP

2020 . 1 21 7"11:45

(Name of Corporation as cur	rrently filed with the Florida Dept. of State)
P17000008219	
(Document Num	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation: A. If amending name, enter the new name of the corporation	s, this Florida Profit Corporation adopts the following amendment(s
A. transending name, enter the new name of the corporation	<u>)11:</u>
name must be distinguishable and contain the word "corporation". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	7.3
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	At .
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent	
	ida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A language land land land land land land land land	Agent:
rangum us registered agem. Tamjum	,
Signature of N	yy . Tew Registered Agent, if changing
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120	A .

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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:

(Attach	additional	sheets,	if necessary)
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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:

Example: X Change	<u>PT</u>	John Doe	ý.) .	
X Remove	<u>v</u>	Mike Jones	7 • 1	
			•	
_X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<u>Addres</u> s
I) Change	D	Fabiola Rest	repo Ramos	9755 NW 52 ST, APT 321
X Add			•	DORAL, FL 33178
Remove			3°1 -	
2) Change				
Add			A1 .	
Remove 3) Change		_	<u>\`1</u> ·	
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4) Change		<u> </u>	<u></u>	
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5) Change	-	<u> </u>	<u> </u>	
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6) Change				
Add			11 ·	
Remove			17	

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an amendment provides for an	exchange, reclassification, or cancellation of issued shares.	
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The date of each amendment(s date this document was signed.	· · · · · · · · · · · · · · · · · · ·	. if other than the
Effective date if applicable:		\$ 9 9 9 9 9 9 9 9 9 9
	010 naier fhan	90 days after amendment file date;
Note: If the date inserted in this document's effective date on the	s block does not meet the app Department of State's records	dicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	23 · · · · · · · · · · · · · · · · · · ·
■ The amendment(s) was were action was not required.	adopted by the memporators, i	ir board of directors without shareholder action and shareholder $\frac{1}{\sqrt{k}}$.
by the shareholders was were	sufficient for approval	The number of votes cast for the amendment(s)
☐ The amendmentis) was were must be separately principled.	approved by the shareholders ti tor costs voting group entitled t	My hrough young groups. The following statement to vire separately on the amendments).
"The number of votes of	ist for the amendment(s) was v	were sufficient for approval
by:		
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Signature		UMAIN
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