## P17000016898

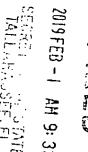
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ENTE TO

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: BIC METAL GRO	OUP CORP	
DOCUMENT NUMB			
The enclosed Articles (	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	Her to the following:	
	HENRY RUIZ		
-		Name of Contact Person	1
	H & L TAX AND ACCOUN		
-		Firm/ Company	
	1 122 LOW TO CUBBET OF	• •	
	14331 SW 120 STREET SUI		
		Address	
	MIAMI FLORIDA 33186		
-	<del> </del>	City/ State and Zip Cod	c
HENR	YRUIZ@LIVE.COM		
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
HENRY RUIZ		305	7524230
Name of Contact Person		at (305 ) 7524230  Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tailahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

BIC METAL GROUP CORP

(Name	of Corporation as currer	itly filed with the Florida Depte of State 9: 33		
P17000016898	SECRECTOR			
	(Document Number of Corporation (if known) (150 35E, FL)			
Pursuant to the provisions of section 607 its Articles of Incorporation:		s Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	ame of the corporation:			
N/A		The new		
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."		
B. Entar name aginainal office address	if annliaghtar	N/A		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
C. Enter new mailing address, if appl	icable:	N/A		
(Mailing address MAY BE A POST	OFFICE BOX)	NA		
D. If amending the registered agent ar new registered agent and/or the new				
·	N/A	<del></del>		
Name of New Registered Agent				
		street address)		
	N/A	·		
New Registered Office Address:		, Florida (City) (Zip Code)		
		,,		
New Registered Agent's Signature, if c				
I hereby accept the appointment as regist	ered agent. I am familia	r 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	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) X Change	V	ELIZABETH HERNANDEZ	11510 SW 147 AVE UNIT 19		
Add			MIAMI FLORIDA 33196 US		
Remove					
2) Change					
Add					
Remove					
3 ) Change	<del></del>				
Add					
Remove					
4) Change					
Add					
Remove			·		
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellat	ion of issued shares.
provisions for implementing the amendment if not contained in the amendment is not contained in the amendmen	endment itself:
N/A	
· · · · · · · · · · · · · · · · · · ·	

1/28/2019 The date of each amendment(s) adoption:	, if other than the
date this document was signed.	, if other than the
1/28/2019	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, thi document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following star must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east 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 shareh action was not required.	older
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	•
1/28/2019 Dated	
Signature Douglas Noquera.	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
DOUGLAS NOGUERA	
(Typed or printed name of person signing)	- <u>-                                  </u>
PRESIDENT	
(Title of person signing)	<u></u>