P170000 45074

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SECRETARY FIRST

UN 2 0 2017
T. LEMMEUX





TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: 3250 BH Inc.		
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	Arthur Kulick		
		Name of Contact Person	1
		Firm/ Company	
	444 Brickell Avenue Suite P	- 	
		Address	
	Miami, FL 33131		
		City/ State and Zip Cod	e
akufic	ck@asifo.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Arthur Kulick		at (<u>917</u>	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

3250 BH Inc,	
(Name of Corporation as currently filed	with the Florida Dept. of State)
P17000045074	
(Document Number of Corp	oration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florid</i> its Articles of Incorporation:	la Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," " "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", word "chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the abbreviation A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·
	AR .
D. If amending the registered agent and/or registered office address in	Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
	₩
(Florida street add	tressi
The the street day	
New Registered Office Address:	. Florida

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 Do	<u>ne</u>		
X Remove	V	Mike Jo	<u>ones</u>		
X Add	<u>SV</u>	Sally Sr	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s	
1) Change	Directo	ν ι '	Arthur E. Kulick	 444 Brickell Avenue	
x Add				Suite P-41	
Remove				Miami, FL 33131	_
2) Change		_		 	_
Add					_
Remove					_
3) Change		_		 	-
Add					
Remove					_
4) Change		_		 	_
Add					-
Remove					_
5) Change		_			
Add					
Remove				<u> </u>	
6) Change					
Add		_		 	•
Add Remove					
Kemove					

Attach <i>add</i>	g or adding additional A litional sheets, if necessary	r). (Be specific)			
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<u>provișion:</u>	dment provides for an est for implementing the ast applicable, indicate N/A)	mendment if not con	tion, or cancellatio tained in the amen	n of issued shares, dment itself:	
		<u>.</u> .		<u>.</u>	
				<u> </u>	
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			<u></u>		
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The date of each amendment(s) adate this document was signed.	adoption:, if other than the
, , , –	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	ino more train 20 days after amenament file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were as by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder
May 8th 1	
Dated	
Stanatura	
Signature (By a	difector president or other officer – if directors or officers have not been
select	ed_by an incorporator – if in the hands of a receiver, trustee, or other court
appoi	nted fiduciary by that fiduciary)
	Davide Boetto
	(Typed or printed name of person signing)
	President
	(Title of person signing)