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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BYS FL COMPAN	IY INC		
DOCUMENT NUM	BER: P18000008072	_		
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	SERGIO PEREZ			
	Name of Contact Person			
		Firm/ Company		
	3465 32ND AVE SE			
		Address	<u> </u>	
	NAPLES, FL 34117			
		City/ State and Zip Code	C .	
	DLAMBERT2H@GMAIL.C	ОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
SERGIO PEREZ		at (384-3151	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check (for the following amount made	payable to the Florida Depa	artment of State:	
■ \$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			Address	
	nendment Section vision of Corporations	Amendment Section Division of Corporations		
	D. Box 6327	The Centre of Tallahassee		
Tallahassee FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BYS FL COMPANY INC

(Name of Corporation :	as currently filed wit	h the Florida Dept.	of State)	-
P18000008072				
(Document	t Number of Corporat	ion (if known)		
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Pr	rofit Corporation add	opts the following ar	nendment(s) to
A. If amending name, enter the new name of the corp.	oration:		7''.	
name must be distinguishable and contain the word "corpe". "Inc.," or Co.," or the designation "Corp." "Inc," o "chartered," "professional association," or the abbrevia	r "Co". A professio	or "incorporated" on all corporation na	or the abbreviation "	o new Corp.," ne word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI	ESS)			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)				
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	ice address:		ne of the	
Name of New Registered Agent		- .		
	(Florida street address			
	Transact and transaction			
New Registered Office Address:	(City)	,	Florida (Zip Code	•)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I as	m familiar with and a		of the position.	
Signatu	re of New Registered i	Agent, if changing		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607	7.0120 (11) (c), F.S.			

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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) Change	VP	BARBARA M BERNAL	3465 32ND AVE SE	_
X Add			NAPLES, FL 34117	_
Remove				
2) Change				_
Add				-
Remove Change			2020	-
Add				- Ti
Remove			- 2 2 2	
4) Change			· · · · · · · · · · · · · · · · · · ·	- <u>[]]</u>
Add				
Remove			<u> </u>	
5) Change				-
Add				-
Remove				
6) Change				-
Add				-
Remove				

ttach additional sheets, if necessary).	(Be specific)			
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an amendment provides for an exc	hange, reclassificati	ion, or cancellation	on of issued share	<u>:s,</u>
rovisions for implementing the am (if not applicable, indicate N/A)	enament it not cont	amed in the ame	nament usen:	
ty not applicane, maicine (VA)				
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у погиррисане, такие гом)				
уу ног аррисане, такие гом)				
у поп иррисате, такие (УА)				<u>-</u>
у погиррисане, такие гом)				
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у погирунские, такие гом)				
у погирунские, такие пла)				
у погиррисане, такие гога				
у погирупсине, такие гога)				

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	09/22/2020	
The date of each amendment(s) adop	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days afte	er amendment file date)
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statument of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopte action was not required.	I by the incorporators, or board of d	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic		of votes cast for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting have the voting group entitled to vote separ	ng groups. The following statement rately on the amendment(s):
"The number of votes east for	the amendment(s) was/were sufficie	nt for approval
bv		···
, —	(voting group)	
09/24/202	•	
DatedSignature	tent	
(By a d≠ec selected, b	or, president or other officer – if dir y an incorporator – if in the hands of iduciary by that fiduciary)	
	Sevalo Pe (Typed or printed name of p	ere2
	(Typed or printed name of p	erson signing)
	Sevaio Perez /	Presiden T
	(Title of person signing)	

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