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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	RATION: SOUTH FLORID	A HIVE INC			
DOCUMENT NUMI					
	of Amendment and fee are st	abmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	JORGE CARPINTERO				
		Name of Contact Perso			
	SOUTH FLORIDA HIVE INC				
		Firm/ Company			
	20175 SW 152ND ST				
		Address			
	MIAMI, FL 33187				
		City/ State and Zip Cod	le		
For further information	E-mail address; (to be used) to be used the concerning this matter, please	sed for future annual report	notification)		
JORGE CARPINTERO		at (de & Daytime Telephone Number		
Name of Contact Person		Area Co	ode & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State;		
S35 Filing Fee	□S43.75 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			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 18 HAY -1 PH 3: 10

SOUTH FLORIDA HIVE INC		to the property of the same of
(Name of Corporation	as currently filed with t	he Florida Dept. of State)
P18000029682		
(Documer	nt Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profi	it Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	peration:	
N/A		27
name must be distinguishable and contain the word "Corp," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc." or "Co". A profe	The new y," or "incorporated" or the abbreviation essional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.)	ESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	l office address in Florida	a, enter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(Ciţy)	(Zip Code)
You Desire and A make the control of the control of		
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a.	ered Agent: m familiar with and accer.	of the obligations of the position
	,	The second 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.

X Change	<u>PT</u>	John Doe			
X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	<u>VP</u>	SANTIAGO GUITIERREZ	20175 SW 152ND ST		
Add			MIAMI, FL 33187		
X Remove					
2) Change	VP	SANTIAGO GUTIERREZ	20175 SW 152ND ST		
XAdd			MIAMI, FL 33187		
Remove					
3.1 Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

	(Be specific)
	
	
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provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date repartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were accition was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were acaetion was not required.	opted by the incorporators without shareholder action and shareholder	
04/27/201 Dated		
Signature		
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	JORGE CARPINTERO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	