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#### COVER LETTER

TO: Amendment Section

Division of Corporations

## NAME OF CORPORATION:

DOCUMENT NUMBER: P18000043285

The enclosed Articles of Amendment and fee are submitted for tiling.

Please return all correspondence concerning this matter to the following:

BEATRICE HENRY

Name of Contact Person BEATRICE BOURSIQUOT INTEL GROUP INC

Firm/ Company

16794 SW 10TH ST

Address

PEMBROKE PINES FL 33027

City/ State and Zip Code

#### BEATRICEHENRYPA@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BEATRICE HENRY at (305 ) 725-7012 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

### BEATRICE BOURSIQUOT INTEL GROUP INC

#### (Name of Corporation as currently filed with the Florida Dept. of State)

P18000043285		
(Document Number)	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	<i>Florida Profit Corporation</i> adopts the	e following amendment(s) to
A. If amending name, enter the new name of the corporation: BEATRICE BOURSIQUOT GROUP INC		The new
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 "P.A.	A professional corporation name mu	bbreviation "Corp.,"
B. Enter new principal office address, if applicable:	16794 SW 10TH ST	10
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	PEMBROKE PINES FL 33027	T le le
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	16794 SW 10TH ST	E PH
	PEMBROKE PINES FL 33027	100 <b>10</b>
		<u> </u>
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		<u>e</u>
Name of New Registered Agent		
	<u> </u>	
tFlorida si	reet address)	
<u>New Registered Office Address:</u>	, Florida, Florida	
	· · · · · · · · · · · · · · · · · · ·	(Zip Code)
<u>New Registered Agent's Signature, if changing Registered Agen</u> <i>Thereby accept the appointment as registered agent I am familiar</i>	<u>t:</u> with and accept the obligations of the <sub>l</sub>	position

Page 1 of 4

Signature of Yew 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:

Example: <u>X</u> Change	<u>19 1</u>	John Dog	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>8V</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			·
Remove			
2) Change			
Add			
Remove 3.) Change			
Add			
Remove			
4) Change		•,,,	<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
) Change			
Add			
Remove			
		Page 2 of 4	

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, (f necessary). (Be specific)

provisions for implementing the amendment (if not applicable, indicate N A)	Page 3 of 4			
(if not applicable, indicate N A)				
(if not applicable, indicate N A)				
(if not applicable, indicate N A)				
			<u></u>	
			<u>II:</u>	
provisions for involuntanting the among ment	<u>n nor containcu in c</u>		11·	
f an amendment provides for an exchange, r				
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

#### Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- □ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes east for the amendment(s) was/were sufficient for approval

(voting group) by

- The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated Signature

(By a director, president or other efficer - if directors or officers have not been selected, by an incorporator - if mathe hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

BEATRICE HEWRY. (Typed or printed name of person signing)

\_\_\_\_\_

Dresidend. (Title otherson signing)