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JUN 1 4 2013 T. LEVILLET

COVER LETTER

TO: Amendment Section Division of Corporations

N. M. OF CORRO	BTCSE Company			
NAME OF CORPO DOCUMENT NUM	P18000043753			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Barbara Rodhouse			
		Name of Contact Person	1	
	BTCSE Company			
		Firm/ Company		
	1635 Woodridge Court			
		Address		
	Lutz, Florida 33559			
		City/ State and Zip Cod	e	
tomi	odhouse@yahoo com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
Barbara Rodhouse		at (416-5014	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or 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		Iment Section on of Corporations	
	vision of Corporations O. Box 6327		Building	
	llahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	tly filed with the Florida Dept. of State)
BTCSE Company	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	<u>ss:</u>
Name of New Registered Agent	
(Florida st	treet address)
·	
New Registered Office Address:	(City) Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar Signature of New I	

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Barbara Rodhouse	1635 Woodridge Court
X Add			Lutz, Florida 33559
Remove			
2) Change	VT	Thomas Rodhouse	1635 Woodridge Court
X Add			Lutz, Florida 33559
Remove			
3) Change		-	
Add			···
Remove			
4) Change			
Add			
Remove			
51 Change		···	
Add			
Remove			
6) Change		_	
Add			
Remove			

ttach additional shee	ets, if necessary).	(Be specific)				
						
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<u> </u>			<u>.</u> .			
			· · · · · · · · · · · · · · · · · · ·			
_ 			 			
		<u> </u>				
						
an amendment pro	vides for an exchai	nge, reclassificat	ion, or cancellat	ion of issued shar	res <u>.</u>	
rovisions for imple (if not applicable	menting the amend	lment if not cont	ained in the ame	ndment itself:		
(пр ти предасличе	, maicaic mm					
			•			
						
					· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:date this document was signed.	, if other than th
Effective date if applicable:	
(no more th	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record	oplicable statutory filing requirements, this date will not be listed as this.
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle.	
"The number of votes cast for the amendment(s) was	/were sufficient for approval
by	<u>.</u>
(voting group)	
☐ The amendment(s) was/were adopted by the board of direct action was not required.	tors without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated 98/18 Signature Darlage A	Johns
	officer - if directors or officers have not been
selected, by an incorporator – if i appointed fiduciary by that fiduci	n the hands of a receiver, trustee, or other court ary)
Barbara Rodhouse	
(Typed or prin	ted name of person signing)
President	of BTCSEConcon

(Title of person signing)