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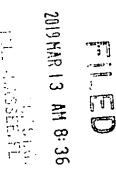
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COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORA DOCUMENT NUMBE	Disco	& Family 092832	1 ne.		
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.			
Please return all correspondence concerning this matter to the following:					
_	Timothy	Name of Contact Person	T. (C		
-	Powell	Firm/ Company			
_	338 Rench	Ave Lehigh Address	Acres F1, 33974		
_	Lehigh	Acres Fl. 3 City/ State and Zip Code	3974		
	E-mail address: (to be us	mercial (legnin	nolitication)		
For further information concerning this matter, please call:					
Timothy Name of	Buell Contact Person	at (<u>239</u> at Co) 324-2571 de & Daytime Telephone Number		
,	the following amount made p				
S35 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)		
Mailii	ng Address	Street	Address		

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation



		01							
Bwell	_&_	Fami	14.	Inc.		2019 F	1AR 13	HA	8: 36
(Name of Corpor	ation as o	currently fi	<u>led/witl</u>	<u>h the Florid</u>	la Dept. of S	State)		,	155
PIXC	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	092	83	2	,		1.1.1	JŠE	E.FL
(Doc	ument N	umber of Co	orporati	on (if know	1)				
Pursuant to the provisions of section 607,1006, Florits Articles of Incorporation:	rida Statu	tes, this <i>Flo</i>	orida Pr	ofit Corpord	ation adopts	the followi	ng amenc	lment	ı(s) to
A. If amending name, enter the new name of the	corpora	tion:							
							The i	new	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co. word "chartered," "professional association," or t	orp," "In	c," or "Co	". A p	oany," or " rofessional (incorporate corporation	d" or the iname musi	abbreviai t-contain	tion the	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A		<u>5</u>)						_	
								_	
						<u> </u>		_	
C. Enter new mailing address, if applicable:									
(Mailing address <u>MAY BE A POST OFFICE</u>)	<u>BOX</u>)						· ·	_	
						_ 		_	
				<u> </u>		-		_	
D. If amending the registered agent and/or registered agent and/or the new register			s in Flo	<u>rida, enter</u>	the name of	the			
	<u>ca ource</u>	uqui tooi							
Name of New Registered Agent							_		
	(F	lorida street	address,)					
New Registered Office Address:					, Flo	rida		_	
		(Ci	ity)			(Zij	p Code)		
New Registered Agent's Signature, if changing I	Quaistara	od Agent:							
I hereby accept the appointment as registered agen			h and ac	ccept the ob	ligations of	the position	!.		
		est p		1 . 10 1	<u> </u>				
S	ignature	of New Reg	istered .	Agent, if cho	inging				

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> <u>John</u>	<u>n Doc</u>	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change	VP	Timothy D Rough Ir	338 farche Are
Add Remove		,	Ichigh Acres Fl 33974
2) Change	<u>vp</u>	Amias T Rocell	336 Rencho Ave Jehigh Aves Fl 3397
Remove 3) Change Add	<u>v P</u>	Timiza D. Pauell	338 Rancho Are Lehigh Acres Fl 35979
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

Atta	nending or adding additional Articles, enter change(s) here: th additional sheets, if necessary). (Be specific)
	
_	
If a	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:
<u> pr</u>	(if not applicable, indicate N/A)
_ _	

The date of each amendment(s) adoption: Monday, March 11th 2019, if other than the date this document was signed.
Effective date if applicable: Morday, Nach 11th 2019 (no more than 90 days after amendment file date)
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 cast for the amendment(s) was/were sufficient for approval
by" (voting group)
☐ 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 3-11-2019 Signature 7
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
hegistered Agent P (Title of person signing)