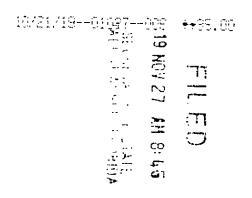
P18000009283

. (Re	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BHIVE SE	ERVICES CORP>			
DOCUMENT NUMBER: P18000098283				
The enclosed Articles of Amendment and fe				
Please return all correspondence concerning	this matter to the following:			
Johanna Chandler				
	Name of Contact Perso	on		
Johanna Chandler P.A	٨.			
	Firm/ Company			
36239 Clara ST				
	Address			
Eustis, FL 32736				
City/ State and Zip Code				
	•			
johanna@johanna	ichandler.com			
E-mail address: (to be used for future annual report	notification)		
For further information concerning this matter	er, please call:			
Johanna Chandler	at (217-1527		
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:		
S35 Filing Fee S43.75 Filing F Certificate of St		☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address	Street	<u>Address</u>		
Amendment Section	Amend	Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Building xecutive Center Circle		

⁴Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Hanie of Curpo	ration as currently filed with the	Florida Dept. of State)		
8000098283				
(Do	ocument Number of Corporation (if	(known)		
suant to the provisions of section 607.1006, Flo Articles of Incorporation:	orida Statutes, this <i>Florida Profit C</i>	Corporation adopts the follow	ving am	endme
If amending name, enter the new name of the JOHANNA CHANDLER P.A.	e corporation:		Th a	
ne must be distinguishable and contain the sorp" "Inc" or Co.," or the designation "Cod" chartered." "professional association," or t	orp," "Inc," or "Co". A profess	or "incorporated" or the ional corporation name mus	abbrei	new viation in the
Enter new principal office address, if applica incipal office address <u>MUST BE A STREET A</u>				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	 	3e. /	19	_
	<u></u>		KEV 27	
If amending the registered agent and/or regis		nter the name of the	<u>*</u> 8: -	
Name of New Registered Agent	ed office address:	>	ືອາ _	
	(Florida street address)		_	
	(City)	, Florida	(Code)	
New Registered Office Address:		(Zin	(Contain	

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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			19
3) Change			80 T
Add			27
Remove			35 J
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	_		
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Real Estate Sales is the purpose of) the
Peal Estate Sales is the purpose of business.	
	
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	19 NOV 27
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	<u> </u>

The date of each amendment(s) a	loption:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no move than 90 days ofter amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, th partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was were su	pted by the shareholders. The number of votes cast for the amendm flicient for approval.	nent(s)
☐ The amendment(s) was were app must be separately provided for	toved by the shareholders through voting groups. The tallowing sta each voting group entitled to vote separately on the amendmentist	tement
"The number of votes east	or the amendment(s) was/were sufficient for approval	
by	tvating group)	
☐ The amendment(s) was were ado action was not required	pted by the board of directors without shareholder action and shareh	wlder
☐ The amendment(s) was were ado action was not required.	nted by the incorporators without shateholder action and shareholde	Ţ
selected	rector, president or other officer—if directors or officers have not b, by an incorporator—if in the hands of a receiver, trustee, or other and fiduciary by that fiduciary)	cen court
	Johanna Melendez Chandler	
	(Typed or printed name of person signing)	25,
	President	- 9 - ₹
	(Title of person signing)	PILED W27 AH 8: 45