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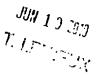
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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: BFUZION CORP. DOCUMENT NUMBER: P18000103175 The enclosed Articles of Amendment and fee are submitted for filling. Please return all correspondence concerning this matter to the following: SFUZION CORP.
Firm/Company FUZIONIECTMALLICOM
-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Wendy Cummings at (2107) 209-6997

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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment

Articles of Incorporation of

Bfuzion) (G	•		ED
(<u>Name of Corporation</u>	on as curi	rently fil	ed with the Florida De	ept. of State)	
P18000103	175			2019 HAY	24 P 2 12
		er of Co	rporation (if known)	.,	
Pursuant to the provisions of section 607.1006, Floridates Articles of Incorporation:	Statutes	this <i>Flor</i>	rida Profit Corporation	adopts the fo	llowing amendment(
A. If amending name, enter the new name of the co	rporatio <u>r</u>	<u>n:</u>			
NIA					The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the	"Inc.	or "Co"	. A professional corp		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		-	<u>~1</u>	<i>-</i> ? ·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	Y)	-	NIA		
Amaning dudiess MATT BE 71 T OST OF FICE BO	/	_			
D. If amending the registered agent and/or register			in Florida, enter the n	ame of the	
new registered agent and/or the new registered	office ado				
Name of New Registered Agent		NI	9		
	757 1.			_	
	(Florid	da street a	adaress)		
New Registered Office Address:	<u> </u>	N) (Cir	A	, Florida	Win Code
		1 2217	,		1114 01122)
New Registered Agent's Signature, if changing Reg	istered A	gent:	l and the co	6.1	
I hereby accept the appointment as registered agent.	i am jamii 	uar wun	ana accept the obligati	ons oj tne pos	:u10ħ.
Sign	ature of N	'ew Regis	stered Agent, if changin	g	

If amending the Officers and/or Directors, enter the title an	d name of each officer/director being removed and title, n	iame, 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.

Mike Jones, V as Remov	ve, and Sally Smit	h, SV as an Add.		
Example: <u>X</u> Change	PT John	Doe		
X Remove	<u>V</u> <u>Mike</u>	Jones		
X Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	<u>CFOS</u>	Tierney	. Levis	3469 McCormick
_XAdd Remove				acce, FL 3476
2) Change	CEO	Willie A	.000e	901 Drew Street # 309 Brooklyn
Remove 3) Change Add Remove	D	henjian	Dowe	NY 11208 901 Drew street #309 Brooklyn NY 11208
4) Change Add Remove				
5) Change Add Remove	<u>_</u> _		<u> </u>	
6) Change Add Remove				

If amending or adding additional Articles, enter chan (Attach additional sheets, if necessary). (Be specific)	ge(s) here:
NIA	
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exchange, reclassific	ation, or cancellation of issued shares,
provisions for implementing the amendment if not co (if not applicable, indicate N/A)	ontained in the amendment itself:
N/A	
10 / 11	
	
<u> </u>	
	<u> </u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more the	m 90 days after amendment file date)
Note: If the date inserted in this block does not meet the appropriate the appropriate of State's record document's effective date on the Department of State's record	pplicable statutory filing requirements, this date will not be listed as the s.
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 entitled	
"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 direct action was not required.	fors without shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated 5/21/19	
Signature (By a director, president or other	officer – if directors or officers have not been
selected, by an incorporator - if i	n the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduci	ary)
Mark A	A. Lewis
	ted name of person signing)
Pres	dent
(T	tle of person signing)