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COVER LETTER

TO: Amendment Section Division of Corporations BELL BEHAVIOR SOLUTION INC P2400001 3221) DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BEHAUIDI SOLUTION INC. Firm/ Company Address Sinleybellouinones 920 gmail-com.
E-mail-address: To be used for future annual report notification) For further information concerning this matter, please call: 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)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

(Additional Copy is enclosed)

Articles of Amendment

to

Articles of Incorporation of

KELL BEHABIOR SOLUTION IN	JC	
	y filed with the Florida Dept. of State)
P24000003220		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the f	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A."	company, "or "incorporated" or the abl professional corporation name must	previation Corp." contain The word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA.	1
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	NA	THE STATE OF THE S
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Since B. Du		
New Registered Office Address: 4 Mil Cardy	1 HN U , ver address) NS , Florida_ (City)	33055. (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar was signatured. New Re		osition.
Cheek if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	John De	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) X Change	UP		Sinly B. Guinones Jour	18353 NW 44th of
Add			Jour	Hiani Gardens, Fl
Remove	\circ		0.1.00:	133055.
2) Change	1		Sinley B. Guinones	18353 NW 44th et.
X. Add	1	ı	JOUET.	Hani Gardens, Fl,
Remove Change	N	A	<u> </u>	<u>33055.</u>
Add				
Remove	k i	1/2	11/0	N/H
4) Change	<u> </u>	<u> </u>	<u> </u>	
Add			,	
Remove	N	A	11/2	— NA
5) Change	1- 11		<u> </u>	
Add	,		,	
Remove	μl	LA.	NA	<u> </u>
6) Change		· ·		<u> </u>
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here:						
(Attach additional sheets, if necessary). (Be specific)						
I'd like to remove the VP title of Sinky B. Quinones,						
because was an error when was created the companie						
I'm the only owner of the company and I need to						
De les Islandos Dia Para						
as soon as possible. Thank you so much.						
as som as possible. Thank you so much.						
·						
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)						
N/A						

The date of such accordance (a) adop	10/24/2024	, if other than the
The date of each amendment(s) adop late this document was signed.	10n: 1012112001	, it office than the
Som and a data of a continuation of the	25/2024	
Effective date <u>if applicable</u> :	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this block locument's effective date on the Depart		filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte action was not required.	t by the incorporators, or board of direc	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	I by the shareholders. The number of vient for approval.	otes east for the amendment(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting g h voting group entitled to vote separate	roups. The following statement ly on the amendment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for	or approval
by		
	(voting group)	
Dated 10 24.	2024	
selected b	or, president or other officer – if directory an incorporator – if in the hands of a residuciary by that fulluciary)	
аррописа	Salow Sinle	p. Quinons.
	(Typed of person	m signing) /
	(Title of person signing)	