Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000331120 3)))



H250003311203ABCR

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| F21 | Address: | | | |
|--------|----------|--|--|--|
| emaii. | Address: | | | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUEBELL 3971, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
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| SECRETARY OF STATE | 2025 SEP |
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Sap 15, 2025 01;12 To: +18506176380 Page: 2/5 Fax: 18134365206

Articles of Amendment to Articles of Incorporation of

| (Same of Corporation as currently filed) | with the Florida Dept. of State) |
|---|---|
| P25000016513 | |
| (Document Number of Corpo | ration (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> its Articles of Incorporation: | Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| | The new |
| name must be distinguishable and contain the word "corporation." "compan "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profes "chartered," "professional association," or the abbreviation "P.A." | |
| B. Enter new principal office address, if applicable: | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| | |
| | |
| | 38 2 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 025 |
| | ÷ S |
| | <u> </u> |
| | ∰ 5 5 |
| | 7 7 |
| D. If amending the registered agent and/or registered office address in l | Florida, enter the name of the |
| new registered agent and/or the new registered office address: | 号令 ぶ |
| Name of New Registered Agent | <u> </u> |
| | |
| (Florida street addre | 200) |
| | |
| New Registered Office Address: (City) | , Florida |
| (cin) | (Elp Cont) |
| | |
| New Registered Agent's Signature, if changing Registered Agent: | |
| I hereby accept the appointment as registered agent. I am familiar with and | accept the obligations of the position. |
| | |
| | |
| | |
| Signature of New Registere | d Agent, if changing |
| Check if applicable | |

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

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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)

Example:

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.

| X Change | <u>PT</u> | John Doe | |
|-------------------------------|--------------------------|-----------------|-------------------------|
| X Remove | $\underline{\mathbf{V}}$ | Mike Jones | |
| <u>X</u> Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | PDST | Vahan Yepremyan | 7901 4th St N |
| Add | | | Ste 300 |
| Remove | | | St. Petersburg FL 33702 |
| 2) Change | | | _ |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | _ |
| Add | | | · |
| Remove | | | |
| 5) Change | | | _ |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

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| f amending or ad | ling additional Articles, enter change(s) here: |
|---------------------|---|
| Attach additional : | heets, if necessary). (Be specific) |
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| f an amendment | provides for an exchange, reclassification, or cancellation of issued shares, |
| provisions for im | plementing the amendment if not contained in the amendment itself: |
| (if not applied | ble, índicase N/A) |
| | |
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| | 7.1.2.11.3.7.4.2.2.3.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4 |
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| The date of each amendment(s) adoption:, if other than the date this document was signed. |
|--|
| Effective date if applicable: (no more than 90 days after amendment file date) |
| (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 incorporators, or board of directors without shareholder action and shareholder action was not required. |
| ☐ 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) |
| Dated 09/15/2025 Signature Vakan Yepnemyan (By a director, president or other officers if directors or officers have not been |
| (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) |
| Vahan Yepremyan |
| (Typed or printed name of person signing) |
| POST |
| (Title of person signing) |