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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	VTION: B.K. EQUITIES.	INC.		
DOCUMENT NUMBI	ER:			
	(Amendment and fee are si	ibmitted for fili	ពន្ធ.	
Please return all corresp	ondence concerning this ma	itter to the follo	wing:	
I	Barbara Humphrey			
_	<u> </u>	Name of Co	ontact Persor	1
1,	aw Office of Robert A. Hee	ekin		
_		Firm/ (	ompany	
1	Sleiman Parkway, Suite 28	80		
_		Ad	dress	
j	acksonville			
_		City/ State	and Zip Cod	e
tjohnse	n@sleiman.com			
	E-mail address: (to be u	sed for future a	nnual report	notification)
For further information	concerning this matter, pleas	se call:		
Barbara Humphrey		at (	904	636-9777 Ex 2
Name of	Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the	Florida Depa	ortment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fi Certified ( (Additional enclosed)	lopy Leopy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314			Amend Divisio Clition	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

FILED

18 JUN 27 AM 8: 58

B.K. EQUITIES, INC.

( <u>Name (</u>	of Corporation as currer	itly filed with the Flor	ida Dept. of State)
	P96000t	)40820	
	(Document Number	of Corporation (if know	wn)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corpo	pration adopts the following amendment(s) to
A. If amending name, enter the new na N/A	nme of the corporation:		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or	"Co". A professiona	"incorporated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
(matang duaress <u>peat the at 1031 )</u>	71 1 <u>(C.L. 1973</u> )		
D. If amending the registered agent an new registered agent and/or the ney			the name of the
Name of New Registered Agent	Rockford Staten	<u></u>	
	1 Sleiman Parkway, Suit	te 270	
	tFlorida s	street address)	<del></del>
New Registered Office Address:	Jacksonville		Florida 32216
		(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familia		

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.

X Change	<u>PT</u>	John Doe	
$\underline{X}$ 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	<u>COO</u>	Robert K. White	1 Sleiman Parkway, Suite 270
Add			Jacksonville, Florida 32216
X Remove			<del></del>
2) Change	V	Michael W. Herzberg	1 Sleiman Parkway, Suite 270
X Add			Jacksonville, Florida 32216
Remove			<del></del>
3 ) Change			
Add			
Remove			<del> </del>
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
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 each amendment(a date this document was signed.	s) adoption:	if other than the
, and the second	N/A	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
June Dated	25 2018	
Signature		
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	ELIT, SLEIMAN, JR.	
	(Typed or printed name of person signing)	-
	Vice President	
	(Title of person signing)	