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NO JUN 27 PM 12: 59

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JUL =1 2013

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	DO	byne Ent	erprises, Inc.
The enclosed Articles of A	<i>mendment</i> and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
	Hange Bisco	Name of Contact Person Augre Entre Firm/Company N. W. 39 Address City/ State and Zip Code Address City/ State and Zip Code Address City/ State and Zip Code City/ State and Zip Code	enprises, FITC Ave. 1718 bietaoil.com
For further information con	ncerning this matter, pleas	se call:	
Ignacio Name of Co	M. Urbie-	at (305 Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made 1	payable to the Florida Depa	ertment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing	Address	Street	Address

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

•	Articles of Amendment	FILED	•
	to Articles of Incorporation of	18 JUN 27 PH 12: 59	
Biscayne	Enterprises	S TENCE ANY OF STATE	
(Name of Corporation as currently	nled with the Florida Dept. 018	tate)	
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor		rnoration adopts the following amendmen	ıt(s) to
its Articles of Incorporation:	100 State (100)	porazion accepto inc romo ving anionanion	.(0)
A. If amending name, enter the new name of the	corporation:		
	NA	The new	
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or to	rp," "Inc," or "Co". A profession		
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET AL			
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE I	$\frac{1}{1000}$		
D. If amending the registered agent and/or registered agent and/or the new registered.		nter the name of the	
Name of New Registered Agent	Alu		
	(Florida street address)		
New Registered Office Address:		, Florida(Zip Code)	
	(Ca))	(Ly Code)	
New Registered Agent's Signature, if changing R	egistered Agent:		
I hereby accept the appointment as registered agent		e obligations of the position.	
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: <u>X</u> Change	PT John Doe	
\underline{X} Remove	V <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	PD Ignocio Urbieta Jr	9701 N.W. 89AV
Add		Medley, FL 33/72
Remove		- maka-sakak-sayahilikas sy andonayar mana kalansangan dani adamangan hasilaman sayan syadakat arin say
2) Change	5 Ignacio M. Urbieto	Medley, FL 33178
Remove		1
3) Change		
Add		
Remove		
1) Change		
Add		
Remove		
5) Change		
Add		
Remove		
δ)Change		
Add		
Remove		

ch additional sheets, if necessary).	ticles, enter change(s) bere: (Be specific)
	\mathcal{A}_{C}
د چه چمانداس پسرسستر بر پیرسته است. پر پوچهای برونوسته دیگر پیری و در سینت برد ۱۰ در سیار بود به در	
	
mendment provides for an exc	change, reclassification, or cancellation of issued shares,
sions for implementing the amo if not applicable, indicate N/A)	endment if not contained in the amendment itself:
, <u></u>	A/9

and a mention of a monature of the article...

. 1 1 10
The date of each amendment(s) adoption:
Effective date if applicable: 61713
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
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)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (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)
Tanacio M. Uchieta (Types or printed name of person signing)
(1 ypes or printed name of person signing)
General Cansel Secretary
(Title of person signing)

. and a series of Amendment to amend the articl...