P97000021792

	Requestor's Name)	
	Address)	
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((City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: THE BEC GROUP	SERVICES INC.	
DOCUMENT NUMBE	R:		
	Amendment and fee are sub	omitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
SA	AMUEL J. CANTOR		
_		Name of Contact Person	
SA.	AMUEL J. CANTOR, P.A.		
		Firm/ Company	
. 42	26 S. MILITARYTRAIL		
_		Address	•
. D	EERFIELD BEACH, FL 33	3442	
		City/ State and Zip Code	;
PATTY	@SAMCANPA.COM		
	E-mail address: (to be us	ed for future annual report	notification)
	•	•	,
For further information of	concerning this matter, pleas	e call:	
PATTY@SAMCANPA	СОМ	954at (363-7078
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	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations 30x 6327	Amend Divisio Clifton	Address Iment Section on of Corporations Building

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

THE BEC GROUP SERVICES INC.			
(Name of Corporation	as currently filed with the Flo	rida Dept, of State)	
P97000021792			
(Documen	nt Number of Corporation (if kno	own)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	tatutes, this <i>Florida Profit Corp</i>	oration adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the corp	oration:		
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A profession		
B. Enter new principal office address, if applicable:	**************************************		
(Principal office address MUST BE A STREET ADDR	ESS)		25
	<u> </u>	5. N	
		T.	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		er the name of the	
Name of New Registered Agent			
			_
	(Florida street address)		_
N D-14 100 - 412			
New Registered Office Address:	(City)	, Florida(Zip	Code)
		. •	•
New Registered Agent's Signsture, if changing Regist I hereby accept the appointment as registered agent. I		obligations of the position.	
Signat	ture 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: X Change	<u>PT</u>	John Doe	
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
I) Change	PSD	FRANCISCO C. ESPINOSA	145 MADEIRA AVE-STE 311
Add X Remove			CORAL GABLES, FL 33134
2) Change	PSD	FRANCISCO A. ESPINOSA	145 MADEIRA AVE-STE 311
X Add			CORAL GABLES, FL 33134
Remove 3) Change	VD	OSCAR MORENO	145 MADEIRA AVE-STE 311
X Add Remove			CORAL GABLES, FL 33134
4) Change		·	
Remove			
5) Change Add		<u> </u>	
Remove			·
6) Change			
Add			

. <u>If ar</u> (Atta	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
					<u> </u>		· · · · · · · · · · · · · · · · · · ·
		. <u>.</u>					
		-					
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7. <u>If s</u> Pi	rovisions for impl	rovides for an exch lementing the ame le, indicate N/A)	ange, reclassifi ndment if not co	cation, or cancel ontained in the a	lation of issued mendment itsel	shares. [i	
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<u>-</u>							
							- ·

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)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as th
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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.	
Dated	
the state of the second	
Signature (By a director, president or other officer of directors or officers have not been	
selected, by an incorporator - if in the lands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
FRANCISCO C. ESPINOSA	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signifus)	