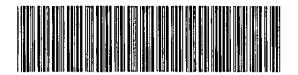
## V34733

Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Bernard and Associ	ciates, Inc.			
DOCUMENT NUM					
	of Amendment and fee are su	abmitted for filing.			
Please return all corre	spondence concerning this ma	iter to the following:			
	Seraphin W. Bernard				
	Name of Contact Person				
	Bernard and Associates, Inc.				
		Firm/ Company			
	240 N.E. 48th Terrace				
		Address			
	Miami, FL 33137				
		City/ State and Zip Code	2		
seraj	ohinbernard\$1@gmail.com		V		
	E-mail address; (to be us	sed for future annual report	notification)		
For further informatio	on concerning this matter, pleas	se call:			
Scraphin W. Bernard		at (	335-2462		
Name of Contact Person		Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	rtment of State:		
S35 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			
	endment Section ision of Corporations	Amendment Section Division of Corporations			
	. Box 6327				
Tallahassay FL 37314		Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Daniel and Associates for

Bernard and Associates, inc.		
(Name of Corporation as current	tly filed with the Florida Dept. of State)	
V-34733		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607,1006. Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment	ent(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation" (Corp., ""Inc., " or Co., " or the designation "Corp., " "Inc., " or word "chartered, " "professional association, " or the abbreviation	"Co". A professional corporation name must contain the	7
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	- <del> </del>	
,		$\neg$
	<u></u>	=
C. Enter new mailing address, if applicable:	7g:	
(Mailing address MAY BE A POST OFFICE BOX)	<u>-</u>	<u> </u>
	<b>1.</b>	
	<del></del>	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		
Name of New Registered Agent		
(Florida st	reet address)	
New Registered Office Address:	Placid.	
New Registered Office Address.	, Florida	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar		
тистоў ассері те арранинені аз годзяегой адоні. Тан заніна	wan and accept the oraganous of the position.	
Signature of New 1	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>	Name	Address			
1) Change	<u>v</u>	Tedd Bernard	240 N.E. 48th Terrace			
Add X Remove			Miami, FL 33137			
2) Change		<del>-</del>				
Add						
Remove						
3 ) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

	ional sheets, į	f necessary).	(Be specific	nange(s) here:			
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<u>l'an amendi</u>	<u>nent provide</u>	s for an excl	hange, reclass	<u>ification, or c</u> t contained in	ancellation of	issued shares,	
if not a	pplicable, ina	dicate N/A)	enument ii no	r contained in	me amenume	iii iisen;	
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	08/31/2017	
The date of each amendment(s)	adoption:	if other than the
date this document was signed.		
	/31/2017	
Effective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date Department of State's records.	e will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	ı
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s);	ıı
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
09/20/20 Dated	17	
	47)	
Signaturo		
	director, president or other officer - if directors or officers have not been	<del></del>
	ted, by an incorporator - if in the hands of a receiver, trustee, or other court	
	nted fiduciary by that fiduciary)	
	Seraphin W. Bernard	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>