

P 030000445/19

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

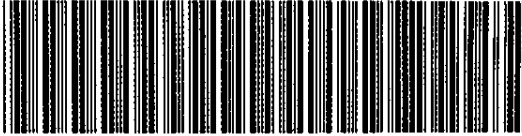
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/20/12--01041--024 **35.00

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FILED
12 JAN 20 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓

NC
KRG
1/24

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BROWN VAN LINES INC

DOCUMENT NUMBER: P03000044519

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LAURA BRANDT
Name of Contact Person
BROWN VAN LINES INC
Firm/ Company
2000 N STATE ROAD 7
Address
MARGATE, FL 33063
City/ State and Zip Code

ANNA@MOVINGCOST.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURA BRANDT at (954) 958-2236
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status enclosed) | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is (Additional Copy | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy is enclosed) |
|---|---|---|---|

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2012

LAURA BRANDT
BROWN VAN LINES INC
2000 N STATE ROAD 7
MARGATE, FL 33063

SUBJECT: BROWN VAN LINES, INC.
Ref. Number: P03000044519

We have received your document for BROWN VAN LINES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #M11000000866- COLONIAL VAN LINES LLC. IF YOU ALL ARE THE SAME PEOPLE, WE NEED A LETTER STATING THIS..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 312A00001571

Aldo L. DiSorbo

2000 State Road 7, Margate, FL 33063
954-958-2236 phone/954-958-2216 fax

FAX COVER SHEET

DATE: 01/24/12

PAGES: 2

TO: Karen
Division of Corporations

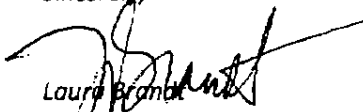
FROM: Laura Brandt, Executive Assistant to Aldo DiSorbo
954-958-2236/954-958-2216 fax

RE: Brown Van Lines, Inc.
Colonial Van Lines, Inc.
Colonial Van Lines, LLC
Colonial Van Lines Relocation Division, Inc

MESSAGE:

Karen, please find attached letter per our conversation.

Sincerely,



Laura Brandt
Executive Assistant to Aldo DiSorbo
954-958-2236
954-958-2216 fax



January 23, 2012

To: Division of Corporations
Attn: Tina Roberts

Re: Colonial Van Lines, Inc. – P04000124962
Colonial Van Lines, LLC - M11000000866

This letter will serve as notice that the above referenced corporations, Colonial Van Lines, Inc and Colonial Van Lines, LLC, are of the same incorporators.

Sincerely,

A handwritten signature in black ink, appearing to read "Laura Brandt", with a long horizontal line extending to the right.

Laura Brandt
Colonial Van Lines
954-958-2236



January 24, 2012

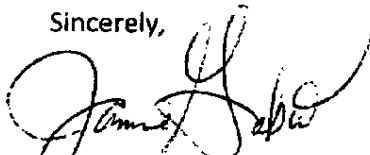
To: Division of Corporations
Attn: Karen

Re: Colonial Van Lines, LLC – M11000000866
Colonial Van Lines Relocation Division, Inc. - P00000115298
Brown Van Lines, Inc. – P03000044519

This letter will serve as notice that the above referenced corporations, Colonial Van Lines, LLC, Colonial Van Lines Relocation Division, Inc. and Brown Van Lines, Inc. are of the same incorporators.

Please submit a name change for Brown Van Lines, Inc. to Colonial Van Lines, Inc.

Sincerely,



Janise Gabco
Colonial Van Lines
954-958-2236

Articles of Amendment
to
Articles of Incorporation
of

BROWN VAN LINES INC ,

(Name of Corporation as currently filed with the Florida Dept. of State)

P03000044519

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendments to its Articles of Incorporation:

FILED
12 JAN 20 PM 3:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. If amending name, enter the new name of the corporation:

COLONIAL VAN LINES INC

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____ _____ _____

The date of each amendment(s) adoption: 01/19/2012

Effective date if applicable: 01/19/2012
(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)

- 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 01/19/2012
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)

ALDO DISORBO

(Typed or printed name of person signing)

PVTS

(Title of person signing)