## P04000103865

(Re	equestor's Name)			
(Ac	ddress)			
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(Ci	ty/State/Zip/Phone	e #)		
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**C** LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	BRAZIL SAO PA	ULO, INC			
	000103865				
The enclosed Articles of Amend	ment and fee are su	bmitted for filing.			
Please return all correspondence	concerning this ma	tter to the following:			
MARCO	REIS				
		Name of Contact Person	1		
USA TAX	USA TAX CORPORATION				
	Firm/ Company				
591 E SA	591 E SAMPLE RD				
	Address				
POMPAN	POMPANO BEACH FL 33064				
		City/ State and Zip Code	2		
USATAX@US	ATAXFL.COM				
E-ma	il address: (to be us	sed for future annual report	notification)		
For further information concerning	ng this matter, pleas	se call:			
MARCO REIS		954 at (	788-1818		
Name of Contact	Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	rtment of State:		
	3.75 Filing Fee & ctificate 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  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building yeartive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SEGRETARY OF STATE DIVISION OF CORPORATION

BRAZIL SAO PAULO, INC

2016 AUG 29 AM 10: 39

( <u>Name</u> )	of Corporation as curren	tly filed with the Florida Dept.	of State)	
P04000103865				
Company Compan	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation add	opts the following amendment(s)	
A. If amending name, enter the new na	ame of the corporation:			
BR CONSTRUCTION & REMODELIN	G, INC		The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporat	rated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		20801 BISCAYNE BLVD,	20801 BISCAYNE BLVD, SUITE 403	
		AVENTURA 33180, FLOR	RIDA, UNITED STATES	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		20801 BISCAYNE BLVD, SUITE 403		
		AVENTURA 33180, FLORIDA, UNITED STATES		
D. If amending the registered agent an new registered agent and/or the new			<u>e of the</u>	
Name of New Registered Agent				
	20801 BISCAYNE BLV	D, SUITE 403		
	(Florida s	treet address)		
New Registered Office Address:	AVENTURA		Florida 33180	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			of the position.	
	Signature of New	Registered Agent, if changing	<del></del>	

## 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	P	_	LUIZ P RIBEIRO	20801 BISCAYNE BLVD,
Add				SUITE 403, AVENTURA, FL
Remove				33180
2) Change		_		
Add				
Remove				
3) Change		<del></del>		***
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	08/23/2016		
	adoption:		, if other than the
late this document was signed.		SEURETARY JIVISION OF C	EÚ MEndad
Effective date <u>if applicable</u> :		JEMISION OF C	ORPORATIO
	(no more than 90 day	es after amendment file date) 2016 AUG 29	AM 10. 00
Note: If the date inserted in this locument's effective date on the	block does not meet the applicable	statutory filing requirements, this date will	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were a by the shareholders was/were		aber of votes cast for the amendment(s)	
	pproved by the shareholders through or each voting group entitled to vote.	voting groups. The following statement separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were suf	ficient for approval	
by			
• •	(voting group)		
The amendment(s) was/were a action was not required.	dopted by the board of directors with	out shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without s	hareholder action and shareholder	
08/23/20			
DatedSignature		_	
	director, president or other officer –	if directors or officers have not been	<del></del>
selec	eted, by an incorporator - if in the han	ds of a receiver, trustee, or other court	
арро	inted fiduciary by that fiduciary)		
	LUIZ P RIBEIRO		
	(Typed or printed name	of person signing)	
	PRESIDENT		
	(Title of pe	rson signing)	