

PO8000087528

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : GM FINANCIAL GROUP  
Account Number : 119980000102  
Phone : (954) 428-8899  
Fax Number : (954) 428-6699

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

COR AMND/RESTATE/CORRECT OR O/D RESIGN  
EXPERT TRANSFER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

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11 JAN 11 AM 8:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 JAN 11 AM 9:50

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Handwritten signature and date: 1/11/11

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Articles of Amendment  
to  
Articles of Incorporation  
of

**EXPERT TRANSFER, INC.**

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

**P08000087528**

(Document Number of Corporation (if known))

11 JAN 11 AM 9:50  
SECRETARY OF STATE  
DATE OF FILING

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

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

BROTHERS AUTO COLLISION, 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**)*

6900 SW 21<sup>st</sup> Court, Suite 6, \_\_\_\_\_

Davie, Florida 33314

**C. Enter new mailing address, if applicable:**

*(Mailing address **MAY BE A POST OFFICE BOX**)*

6900 SW 21<sup>st</sup> Court, Suite 6

Davie, Florida 33314

**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:

CHRIS MINUTOLO

6900 SW 21<sup>st</sup> Court, Suite 6, .

New Registered Office Address:

*(Florida street address)*

Davie, Florida 33314

\_\_\_\_\_, Florida  
*(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)*

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<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	JEFFIFER ROMANO	5547 N MILITARY TRAIL BOCA RATON, FL 33487	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
P	CHRIS MINUTOLO	6900 SW 21 <sup>st</sup> Court, Suite 6, Davie, Florida 33314	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**  
*(if not applicable, indicate N/A)*

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The date of each amendment(s) adoption: 12/27/2010

(date of adoption is required)

Effective date if applicable: 12/27/2010

(no more than 90 days after amendment file date)

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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 12/27/2010

Signature Jennifer Romano

(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)

JENNIFER ROMANO  
(Typed or printed name of person signing)

PRES.  
(Title of person signing)

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