XXX 1305

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





300238529213



COVER LETTER

TO: Amendment Section Division of Corporations

·	\circ
NAME OF CORPORATION TVELGLE DOCUMENT NUMBER: 110000	t Enterprise Brokers Inc 82054
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma Heid A 7951 Sc	Name of Contact Person Oxhty Services Firm/Opmpany Oxh SH SHR 204 Address
	City/State and Zip Code Services and Hotraul - um self for future annual report notification)
For further information concerning this matter, please Lead Robert Person Name of Contact Person	at (305) 226 - 2575 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Department of State:
□ \$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Articles of Amendment to

Articles of Inco	rporation
Fleight Enterphise. (Name of Corporation as currently filed with the Flo	Brolors 50
11000082054	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F_0 is Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation." "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association." or the abbreviation "P	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	5901 NW 157 St.
	Miani lakes Fl 33014
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	5901 NW 157 St Swite 107
	Mari Lakes, Fl 33011
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
! }	RIZO
5901 NW	isi St Suite 107
(Florida stree	et address)
New Registered Office Address: HIAM (AH) (City)	Florida 33014 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered gent. I am familiar wi	th and accept the obligations of the position.
Signature of New Regimered Ag	gent, if changing SECRETA HASS
Pose Le	SEE TO TO

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.

	ve. and odiny omini, sv as an Ada.	
Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) <u>K</u> Change	VP Alex RIZO	5901 NW 151 St Ste 107
Add		<u> Haui Fl 33014</u>
Remove	P Harrel 2120	
2) Change	P Harrel 480	5901 NW 151 st Ste10 Heari, Fl 3304
Add · · Remove		Hami PI Sough
3) Change		
Add		
Remove		
4) Change		
Add		·
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Damaya		

an amendment provides for an exchang	, reclassification, or cancellation of issued shar	<u>'es,</u>
orovisions for implementing the amenda (if not applicable, indicate N/A)	ent if not contained in the amendment itself:	
(ij noi appricable, malcule WA)		

The date of each amendment(s) ac	loption: 8 13 201 C
Effective date if applicable:	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required,	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated	13/2012
Signature	
(By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	Alex Rizo
	(Typed or printed name of person signing)
	President
	(Title of person signing)