## P15000057277

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JUL 27 2014 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SETUP BRANI	DING INC				
DOCUMENT NUMBER: P15000057277					
The enclosed Articles of Amendment and fee are	submitted for filing.				
Please return all correspondence concerning this r	matter to the following:				
LEONEL LARES					
-	Name of Contact Person	1			
	Firm/ Company				
4724 NW 114TH AVE UN	NIT 202				
	Address				
DORAL, FL 33178					
	City/ State and Zip Cod	e			
PLUZQUINOSF@HOTMAIL.C	СОМ				
E-mail address: (to be	used for future annual report	notification)			
For further information concerning this matter, plo	ease call:				
PEDRO LUZQUINOS	at ( <sup>954</sup>	655-8413			
Name of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for the following amount mad	de payable to the Florida Depa	artment of State:			
■ \$35 Filing Fee & Certificate of Status	•	□\$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 of Corporations Building			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	(	of		
SETUP BRANDING INC				
( <u>Name</u>	of Corporation as curren	ntly filed with the Florida Dept. of State)		
P15000057277				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the follo	owing amendment(s	
A. If amending name, enter the new n	ame of the corporation:			
			The new	
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or th "Co". A professional corporation name m "P.A."		
B. Enter new principal office address, if applicable:		4724 NW 114TH AVE UNIT 202		
(Principal office address MUST BE A S		DORAL, FL 33178		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4724 NW 114TH AVE UNIT 202		
		DORAL, FL 33178		
D. If amending the registered agent ar new registered agent and/or the ne			124 A	
Name of New Registered Agent				
	4724 NW 114TH AVE UNIT 202			
	(Florida s	street address)	5757 U	
New Registered Office Address:	DORAL	Florida 3317	78 ·	
			Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Ager vered agent. I am familian	nt: r with and accept the obligations of the positi	on.	

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: X Change	<u>PT</u>	John Do	<u>0e</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change		_		
Add				
Remove				
2) Change				
Add .				
Remove				
3) Change		<u></u>		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		
Remove				
0 9				
6) Change		-		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
P
LARES, LEONEL
OLD ADDRESS: 4727 NW 114TH AVE SUITE 202, DORAL, FL 33178
NEW ADDRESS: 4724 NW 114TH AVE UNIT 202, DORAL, FL 33178
VP
PIRELA, DAYANA
OLD ADDRESS: 4727 NW 114TH AVE SUITE 202, DORAL, FL 33178
NEW ADDRESS: 4724 NW 114TH AVE UNIT 202, DORAL, FL 33178
T
PIRELA, NESTOR
OLD ADDRESS: 4727 NW 114TH AVE SUITE 202, DORLA, FL 33178
NEW ADDRESS: 4724 NW 114TH AVE UNIT 202, DORAL, FL 33178
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)

The date of each amendment		, if other than the
date this document was signed	. , 	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 50 days after amenament fite date)	
	this block does not meet the applicable statutory filing requirements, this date ne Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):	11
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
	/2015	
Dated	<del>/</del>	
Signature	Lune/lu	
	by director, president or other officer – if directors or officers have not been	
	elected, by an incorporator - if in the hands of a receiver, trustee, or other court	
aş	ppointed fiduciary by that fiduciary)	
	LEONEL LARES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	