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(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	08/23/1901021012 **3(5.00
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SEP - 3 2019

COVER LETTER

TO: Amendment Section

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Division of Corporations

NAME OF CORPORATION: Braman Cadillac, Inc.

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

David Leibowitz

Name of Contact Person

Braman Management Association

Firm/ Company

2060 Biscayne Boulevard, 2nd Floor

Address

Miami, Florida 33137

City/ State and Zip Code

davidl@bramanmanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 David Leibowitz
 at (305)
 576-1889

 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:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate 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 Street Address

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

Articles of Amendment to Articles of Incorporation \mathbf{of}

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

(Document Number of Corporation (if known)

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Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Profit Corpora</i>	<i>tion</i> adopts the following amendment(s)
A. If amending name, enter the new name of the	<u>e corporation:</u>	
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A professional c	
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>)	<u>BOX</u>)	
D. <u>If amending the registered agent and/or regis</u> <u>new registered agent and/or the new register</u> <u>Name of New Registered Agent</u>	red office address:	
	(Florida street address)	
<u>New Registered Office Address</u> :	(City)	, Florida (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

· ' ,

Braman Cadillac, Inc.

480688

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)

Example:

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 Doc. PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change \mathbf{PT} John Doe X Remove <u>V</u> Mike Jones X Add <u>SV</u> Sally Smith Type of Action Title Name Address (Check One) Т Evan Samuel Bernstein 2060 Biscayne Boulevard 1) ____ Change 2nd Floor _____ Add Х Miami, Florida 33137 _ Remove Richard Howard Kotzen 2060 Biscayne Boulevard T 2) Change 2nd Floor X _ Add Miami, Florida 33137 Remove 3) ____ Change ____ Add ____ Remove 4) ____ Change ____ Add _ Remove 5) ____ Change ____ Add ___ Remove 6) ____ Change ____ Add Remove

f 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(4)	f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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(if not applicable, indicate N/A)	f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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	08/19/2019	
The date of each amendment(s) date this document was signed.	adoption:, if	other than
	8/19/2019	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	s block does not meet the applicable statutory filing requirements, this date will not b Department of State's records.	be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	idopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ad action was not required.		
action was not required.	idopted by the incorporators without shareholder action and shareholder	
action was not required.		
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action was not required. The amendment(s) was/were action was not required. 08/22/21 Dated Signature		
action was not required. The amendment(s) was/were action was not required. 08/22/21 Dated Signature (By a	9 a director, president or other officer - if directors or officers have not been	
action was not required. The amendment(s) was/were action was not required. 08/22/219 Dated Signature (By a select)		

Secretary

(Title of person signing)