Z74019

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(Add	dress)	
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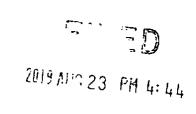
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Braman Colorado	European Imports, Inc.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are so	ibmitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
	David Leibowitz		
		Name of Contact Person	1
	Braman Management Associ	iation	
	_	Firm/ Company	
	2060 Biscayne Boulevard, 2r	nd Floor	
	<u> </u>	Address	
	Miami, Florida 33137		
		City/ State and Zip Cod	<u> </u>
david	@bramanmanagement.com		
	E-mail address; (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
David Leibowitz		at (305	576-1889
Name of Contact Person		at () Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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 of



Braman Colorado European Imports, Inc.

(Name of Corporation as	currently filed with the Florida Dept. of State)
F74019	
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statuits Articles of Incorporation:	ates, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:
	The new proporation," "company," or "incorporated" or the abbreviation ac, " or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Σ)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	
(F)	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent.—I am for	
Signature o	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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	T	Evan Samuel Bernstein	2060 Biscayne Boulevard
Add			2nd Floor
X Remove			Miami, Florida 33137
2) Change	Т	Richard Howard Kotzen	2060 Biscayne Boulevard
X Add			2nd Floor
Remove			Miami, Florida 33137
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additi	or adding additional Artional sheets, if necessary)	. (Be specific)	- <u>,</u> -		
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- <u></u>				·	
		 			
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		.			
•	,				
<u>lf an amendi</u>	ment provides for an exc	change, reclassifica	tion, or cancellati	on of issued shares.	L
provisions f	for implementing the am	endment if not con	itained in the ame	ndment itself:	
(if not a	pplicable, indicate N/A)				
<u>-</u>					
					
	·				
-					
					

	08/19/2019	
The date of each amendment(s) date this document was signed.	ndoption:	, if other than the
-	/19/2019	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing requirements, this openartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were as by the shareholders was/were:	dopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	t(s)
	oproved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	nent
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	der
08/22/20 Dated		
Signature		
select	director, president or other officer if directors or officers have not bee ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	David Leibowitz	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	