

N1800000 9084

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

(Business Entity Name)

(Document Number)

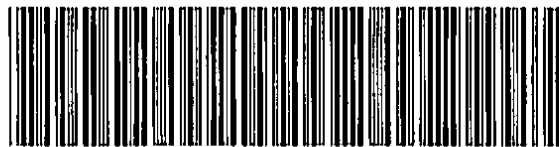
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FILED
MAY 07 2019
TALLAHASSEE, FL 32301

19 MAY -3 PM 3:30

MAY 07 2019
S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 24, 2019

SERGIO D CANDIDO
LOCAL BROTHERS RC INC
325 IVES DAIRY ROAD APT 4
MIAMI, FL 33179

SUBJECT: LOCAL BROTHERS RC INC
Ref. Number: N18000009084

We have received your document for LOCAL BROTHERS RC INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young
Regulatory Specialist II

Letter Number: 519A00008240

RECEIVED
2019 MAY -3 AM 10:42
SECRET
TALLAHASSEE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LOCAL BROTHERS RC INC

DOCUMENT NUMBER: N18000009084

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

Please return all correspondence concerning this matter to the following:

SERGIO D CANDIDO

(Name of Contact Person)

LOCAL BROTHERS RC INC

(Firm/ Company)

325 IVES DAIRY RD APT 4

(Address)

MIAMI FLORIDA 33179

(City/ State and Zip Code)

localbrothersrc@gmail.com

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

For further information concerning this matter, please call:

SERGIO D CANDIDO

at

786

4438967

(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:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

_____The new
name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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: SERGIO D CANDIDO
325 IVES DAIRY RD APT 4
(Florida street address)

New Registered Office Address:
MIAMI, Florida 33179
(City) (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)

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:

☒ Change PT John Doe

☐ Remove V Mike Jones

☐ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	P	SERGIO D CANDIDO	325 IVES DAIRY RD APT 4
<input checked="" type="checkbox"/> Add			MIAMI FL 33179
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	P	LUIS F CANSECO	2006 N 34TH AVENUE
<input type="checkbox"/> Add			HOLLYWOOD FL 32021
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	RC	CAMILO GALEANO	2600 SW 27TH AVE # 906
<input checked="" type="checkbox"/> Add			MIAMI FL 33133
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	RC	JORGE A FONSECA	1761 NW 183RD STREET
<input type="checkbox"/> Add			MIAMI GARDENS FL 33056
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

(attach additional sheets, if necessary). (Be specific)

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 04/08/2019

Signature _____
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Sergio D. Candido
(Typed or printed name of person signing)

President
(Title of person signing)