## P0000077164

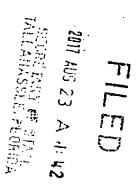
(Re	questor's Name)	
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## COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Dan's Train Depot	. Inc.	
DOCUMENT NUMI	P00000077164		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Daniel L. Glasure		
		Name of Contact Person	
	Dan's Train Depot, Inc.		
		Firm/ Company	
	4984 SE 6th Ave.	. ,	
		Address	
	Ocala, FL 34480		
		City/ State and Zip Code	-
dan@	brasstrains.com		
		sed for future annual report	notification)
	man address. (to be a		,
For further informatio	n concerning this matter, plea	se call:	
Daniel L. Glasure		at (	292-4116 
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Div P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Dan's train Depot, Inc.	
(Name of Corporation a	s currently filed with the Florida Dept. of State)
P00000077164	
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Staits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. Hamending name, enter the new name of the corpo	ration:
BRASSTRAINS.COM, Inc.	The new
	corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRE.</u>	Not applicable
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)	
	4984 SE 6th Ave.
	Ocala, FL 34480
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent Not applicable	
Name of New Negmered Agent	
<del></del>	(Florida street address)
Not applicable	Placida
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:  I familiar with and accept the obligations of the position.
I hereby accept the appointment as registered agent. I an	
Signatur	e 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>	<u>Name</u>		Address
1) Change		Not applicable		
Add			-	
Remove				
2) Change		_		
Add			-	
Remove				
3) Change		<del></del>		
Add				
Remove				
4) Change	<del></del>		<del></del>	
Add			-	
Remove				
5) Change		<u> </u>		
Add				
Remove				
6)Change				
Add		<del>-</del>		
Remove				

(Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
Not applicable	
<del></del>	
	1 000
	<u> </u>
F. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
Not applicable	

•	August 17, 2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
A Effective date if applicable:	ugust 17, 2017	
	(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 with Department of State's records.	Il not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted 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):	
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
-, <u></u>	(voting group)	
	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated Signature	3-21-2017	
Signature	a/2	
By a	a director, president or other officer – if directors or officers have not been	
	eted, by an incorporator – if in the hands of a receiver, trustee, or other court	
арро	sinted fiduciary by that fiduciary)	
	Daniel L. Glasure	
	(Typed or printed name of person signing)	····
	President	
	(Title of person signing)	<del></del>