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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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2012 JUN 15 P 4: 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	N: Bran	dash.	Incorpi	orated
DOCUMENT NUMBER: _	081000	<u> </u>		
The enclosed Articles of Ame	endment and fee are sub	omitted for filir	ıg.	
Please return all corresponde	nce concerning this mat	ter to the follow	ving:	
	م مرداد کم	la Foo	. l	
	<u> Zawaic</u>	Name of Co	ntact Person	
			ompany	
	925	E. Cyp	ress Cre	eek Rd.
	Fort	Lauderci City/ State a	ele Fond Zip Code	L 33334
E	-mail address: (to be us	ed for future ar	nnual report r	notification)
For further information conc	erning this matter, pleas	se call:		
Eduardo i	Togel	at (	954	
Enclosed is a check for the fe	ollowing amount made	payable to the I	Florida Depai	rtment of State:
\$35 Filing Fee C	1\$43.75 Filing Fee & Certificate of Status	□\$43.75 Fil Certified ( (Additiona enclosed)	Copy I copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A Amendmen Division o P.O. Box 6	Street Address  Amendment Section  Division of Corporations  Clifton Building			
Tallahasse		2661 Ex	xecutive Center Circle	

Tallahassee, FL 32301

## **Articles of Amendment**

	Articles of Incorporation	ion		
(Name of Corporation as currently	Incorporated	ent of State)		
	> 81000	ept. of State)		
	of Corporation (if known)	<u> </u>		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Florida</i> a	Profit Corporation adop	ts the following a	mendment(s) to
A. If amending name, enter the new name of the	corporation:			
				he new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "Co". A	npany," or "incorporation professional corporation	ted" or the abbi on name must cor	reviation ntain the
B. Enter new principal office address, if applicate (Principal office address MUST BE A STREET ALL)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u></u>			
•				
D. If amending the registered agent and/or regis new registered agent and/or the new registered		lorida, enter the name	<u>of the</u>	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·			
	(Florida street addre	ng)		
V . D	(Fioriaa sireet aaare.			
New Registered Office Address:	(City)	, Florida	(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		accept the obligations o	f the position.	
. Signature of	New Registered Agent, if	changing	ZUIZ SECRE TALLAH	

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RETARY OF STATE AHASSEE, FLORIDA

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> J	John Doe	
X Remove	<u>v</u> <u>n</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	<u>vP</u>	Shawn Fogel	17 Burning Tree Lane Boca Raton FL 33431
2) Change Add Remove			
3) Change Add Remove			<u></u>
4) Change Add Remove			
5) Change Add Remove		**************************************	
6) Change Add Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)		dding additional Art I sheets, if necessary).	(Be specific)	<u> </u>		
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The date of each amendment(s) adop	tion: 6-11-2012
Effective date <u>if applicable</u> :	6-11-2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.
	ed by the shareholders through voting groups. The following statement th voting group entitled to vote separately on the amendment(s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder
DatedSignature	dunde do las
	for, president or other officer - if directors or officers have not been
	y an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
арроппос	
	Eduardo Fogel
_	(Typed or printed name of person signing)
_	President
<del>-</del>	(Title of person signing)