

PO4X0085930

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

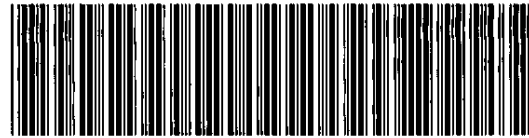
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2010 AUG 24 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BROTHERHOOD INVESTMENT CORPORATION

DOCUMENT NUMBER: P04000085930

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

Please return all correspondence concerning this matter to the following:

MACKENSON BERNARD, ESQ

Name of Contact Person

BERNARD AND AUGUSTE, P.A.

Firm/ Company

2605 W. ATLANTIC AVENUE, D-202

Address

DELRAY BEACH, FL 33445

City/ State and Zip Code

JAHRENDTS@AIFGI.COM

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

For further information concerning this matter, please call:

JEAN AHRENDTS

Name of Contact Person

at (954)

394-3602

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

BROTHERHOOD INVESTMENT CORPORATION

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

P04000085930

(Document Number of Corporation (if known))

FILED
2010 AUG 24 AM 10:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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

2605 W. ATLANTIC AVE

UNIT D-202

DELRAY BEACH, FL 33445

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

2605 W. ATLANTIC AVENUE

UNIT 2-202

DELRAY BEACH, FL 33445

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:

MACKENSON BERNARD

New Registered Office Address:

2605 W. ATLANTIC AVE, D-202

(Florida street address)

DELRAY BEACH

(City)

, Florida 33445
(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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>PD</u>	<u>JEAN-HIGOR AHRENDTS</u>	<u>2605 W. ATLANTIC AVE</u> <u>D-202</u> <u>DELRAY BEACH, FL 33445</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VPD</u>	<u>JACQUES MOISE</u>	<u>2605 W. ATLANTIC AVE</u> <u>D-202</u> <u>DELRAY BEACH, FL 33445</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>TD</u>	<u>EVENS MILIEN</u>	<u>2605 W. ATLANTIC AVE</u> <u>D-202</u> <u>DELRAY BEACH, FL 33445</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If 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/A)

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
TD	KILLICK DOLSAINT	2605 W. ATLANTIC AVE D-202 DELRAY BEACH, FL 33445	Add
P	RICHARD MEREUS, SR.	3344 NW 36 TH TERRACE LAUDERDALE LAKES, FL 33309	Remove
S	LUCIEN F. PIERRE	401 NW 46 TH AVENUE PLANTATION, FL 33317	Remove
T	NORVILIEN FELIX	460 NW 46 TH AVENUE PLANTATION, FL 33317	Remove

• The date of each amendment(s) adoption: 08/20/2010

Effective date if applicable: 08/20/2010
(date of adoption is required)
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

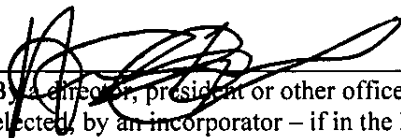
by _____."
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 8/20/2010

Signature


(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JEAN-HIGOR AHRENDTS
(Typed or printed name of person signing)

DIRECTOR
(Title of person signing)