

(Requestor's Name)	)
(Address)	
(Address)	
(City/State/Zip/Phon	ne #)
PICK-UP WAIT	MAIL
(Business Entity Na	me)
(Document Number	)
Certified Copies Certificate	s of Status
Special Instructions to Filing Officer:	

Office Use Only



500305529185

11/14/17--01032--025 \*\*35.00

NOV 15 2017 S. YOUNG FILED
17 NOV 14 PM 4: 20
18 CANASSEELF CORD

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Infinite Abilities In	nc		
	BER: P06000094987			
	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Brooke Hansen			
		Name of Contact Persor	1	
	Infinite Abilities Inc.			
	·	Firm/ Company		
	2791 NE 7th Street			
		Address		
	Pompano Beach, FL 33062			
		City/ State and Zip Cod	e	
brook	ke.rutland@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Brooke Hansen		954 at (	de & Daytime Telephone Number	
Name of Contact Person Area Code & Daytime Tele		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artinent of State:	
S35 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

	of
BROOKE RUTLAND INC.	
(Name of Corporation as curr	ently filed with the Florida Dept. of State)
P06000094987	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>i</u>
Infinite Abilities Inc	The new
name must be distinguishable and contain the word "corporation". "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviation."	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 ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	TALL NO. TO SEE THE PERSON OF
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add  Name of New Registered Agent	
(Florid	a street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am famil	

Signature of New Registered Agent, if changing

ì

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>şv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change		<del>_</del>		<del></del>
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_	<u> </u>	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Pamovo				

on annual market of the strade of the	cles, enter change (Be specific)	<del></del> -			
	·			· · ·	
	<u> </u>				
	<del>.</del>				
	·				
				<u> </u>	<del></del> _
			<del>-</del>		
		-			
	-				
	ange, reclassificat	ion, or cancella	tion of issued	sha <u>res,</u>	
If an amendment provides for an exch					
provisions for implementing the ame	ndment if not con	tained in the am	endment itself	<u>:</u>	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not cont	tained in the am	endment itself	<u>!:</u>	
provisions for implementing the ame	ndment if not con	tained in the am	endment itself	<u>:</u> 	
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel	<u>:</u>	
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel	<u>.                                    </u>	
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel		
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel	<u> </u>	
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel		
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel	<u> </u>	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not con	tained in the am	endment itsel	<u> </u>	
provisions for implementing the ame	ndment if not con	tained in the am	endment itsel	<u>.</u>	
provisions for implementing the ame	ndment if not con	tained in the am	endment itself	<u> </u>	

The date of each amendment(s	November 1, 2017	, if other than th
late this document was signed.	, 440	
Effective date if applicable:	November 1, 2017	
meenve date <u>mappicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in the locument's effective date on the	is block does not meet the applicable statutory filing requirements, this of Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment e sufficient for approval.	u(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and sharehold	der
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
	aber 2, 2017	
Dated		
Signature	Franke Hansen	
	a director, president or other officer - if directors or officers have not beer	<u> </u>
sele	cted, by an incorporator - if in the hands of a receiver, trustee, or other co	
арр	ointed fiduciary by that fiduciary)	
	Brooke Hansen	
	(Typed or printed name of person signing)	
	President	
	(Title of percen cirning)	