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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Brown	Professional Train	ning Association Inc
DOCUMENT NUMBER: P 6900	0012447	
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning the	is matter to the following:	
Roy Scho	of Contact Person)	
BPTA	rm/ Company)	
5307 N	IW 118 AVE (Address)	
Conal S	PRINGS / P/ tate and Zip Code)	53076
For further information concerning this matter,	,	
Roy Scuparz (Name of Contact Person)	at (914) 2 2 9	ne Telephone Number)
Enclosed is a check for the following amount n	nade payable to the Florida De	epartment of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	S43.75 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 O	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Browns ProfessioNAL CHANNE (Name of Corporation as currently filed with the Florida Dept. of State Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporate 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," "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc. "Co". A professional corporation name must contain the word "chartered," association," or the abbreviation "P.A." 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: New Registered Office Address: (Florida street address) (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)

Title	Name	Address	Type of Action
DIR	M. Michelle Vantouten		Add Remove
		Margate 1 1 33903	□ Add
			☐ Remove
			Add Remove
	nding or adding additional Articles, enter additional sheets, if necessary). (Be specific		
 			
	amendment provides for an exchange, recla		
	sions for implementing the amendment if not applicable, indicate N/A)	ot contained in the amendment i	<u>iseii:</u>
		· · · · · · · · · · · · · · · · · · ·	
		 	

The date of each amendment(s) adoption: 2-25-09				
Effective data if applicables				
(n	o more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were a by the shareholders was/were	dopted 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 or each voting group entitled to vote separately on the amendment(s):			
"The number of votes cas	t for the amendment(s) was/were sufficient for approval			
by	oting group)			
(ve	oting group)			
The amendment(s) was/were a action was not required.	dopted 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 2	25-09			
selecte	hirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)			
_	Betty Freeman, Psylo (Typed or printed name of person signing)			
-	(Title of person signing)			