## P10000054648

| (Requestor's Name)                      |  |  |
|---|--|--|
| (Address)                               |  |  |
| (Address)                               |  |  |
| (City/State/Zip/Phone #)                |  |  |
| PICK-UP WAIT MAIL                       |  |  |
| (Business Entity Name)                  |  |  |
| (Document Number)                       |  |  |
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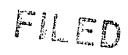
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF COR  | PORATION: DIAZ BROS  | S. CLOTHING, INC.  |   |  |  |  |
|--|--|--|---|--|--|--|
| DOCUMENT NU  | JMBER: <u>P10000054648</u>   |  |   |  |  |  |
| The enclosed Artic   | The enclosed Articles of Amendment and fee are submitted for filing. |  |   |  |  |  |
| Please return all co   | orrespondence concerning this  | s matter to the following:   |   |  |  |  |
|  | PEDRO R. DJ  |  |   |  |  |  |
|  | Na   | ime of Contact Person  |   |  |  |  |
|  | DIAZ BROS. CLOTH   | HING, INC.   |   |  |  |  |
|  |  | Firm/ Company  | <del></del>   |  |  |  |
|  | 5962 Brown Bark D  | rive   |   |  |  |  |
|  |  | Address  |   |  |  |  |
|  | Orlando, F1 32822  | ?  |   |  |  |  |
|  | Cit  | y/ State and Zip Code  |   |  |  |  |
|  |  |  |   |  |  |  |
|  | E-mail address: (to be used  | for future annual report notification)   | <del></del>   |  |  |  |
| For further informa  | ation concerning this matter, p                                      | blease call:   |   |  |  |  |
| Pedro R. Diaz  Name of Contact Person  |  |  | at ( <u>407</u> ) <u>629-1117</u> Area Code & Daytime Telephone Number                |  |  |  |
| Enclosed is a check  | k for the following amount ma  | ade payable to the Florida Depart  | tment 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 Circl | e   |  |  |  |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



| (Name of Corporation as curre  | BROS. CLOTHING              | INC.                                  | 11 MAR 22             | AM 9:1.2       |
|--|-----------------------------|---------------------------------------|-----------------------|----------------|
| (Name of Corporation as curre  | ntly filed with the Florid  | a Dept. of State                      | SECRITY               |                |
| P1000054   | 648                         | *                                     | ALLAHASSE             | STATE          |
| (Document Num  | ber of Corporation (if kno  | own)                                  |                       | - LONIBA       |
| •  | ,                           | ,<br>                                 |                       |                |
| ursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:  | 5, Florida Statutes, this F | lorida Profit Coi                     | <i>rporation</i> adop | ts the followi |
| . If amending name, enter the new name of  | the corporation:            |                                       |                       |                |
|  |                             |                                       |                       | The new        |
| ame must be distinguishable and contain to bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "proj | designation "Corp," "Inc    | c," or "Co". A                        | professional co       |                |
| . Enter new principal office address, if appl  |                             |                                       |                       |                |
| Principal office address <u>MUST BE A STREE</u>  | <u>TADDRESS</u> )           |                                       |                       |                |
|  | <del></del>                 |                                       |                       |                |
|  |                             |                                       |                       |                |
| . Enter new mailing address, if applicable:  |                             |                                       |                       |                |
| (Mailing address MAY BE A POST OFFIC   |                             |                                       |                       |                |
|  |                             |                                       |                       |                |
|  | <del></del>                 | · · · · · · · · · · · · · · · · · · · | <u> </u>              |                |
|  |                             |                                       |                       |                |
| . If amending the registered agent and/or re   |                             | n Florid <u>a, enter</u>              | the name of th        | <u>e</u>       |
| new registered agent and/or the new regis  | tered office address:       |                                       |                       |                |
| Name of New Registered Agent:  |                             |                                       |                       |                |
|  |                             |                                       |                       |                |
| New Registered Office Address:   | (Florida street d           | addrass)                              |                       |                |
| New Registerea Office Address.   | (Fioriaa sireei t           | iauress)                              |                       |                |
| _  |                             | ,                                     | Florida               | <u></u>        |
|  | (City)                      | (Zip C                                | (ode)                 |                |
| Di-4d A41 Si4 if ali-  | - Desistered Assets         |                                       |                       |                |
| ew Registered Agent's Signature, if changin<br>hereby accept the appointment as registered as  |                             | and accept the obj                    | ligations of the      | position       |
| is so, sooop ine appoinment do registered ag   | 50 I win jaintian ir till a |                                       |                       | L              |
|  |                             |                                       |                       |                |
| Si   | ignature of New Registered  | d Agent, if changi                    | ing                   |                |

## If amending the Officers and/or Directors, enter the title and name of each officer/director being rémoved and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

| <u>Title</u> | Name  | Address   | Type of Action             |
|--------------|---|---|----------------------------|
| _PST_        | ILICH DIAZ  | 5962 Brown Bark Dr.<br>Orlando, FL 32822  | ☐ Add<br>☑ Remove          |
| PST          | Pedro R. Diaz   | 5962 Brown Bark Dr.<br>Orlando, Fl 32822  | ☑ <b>x</b> Add<br>□ Remove |
|              |   |   | Add Remove                 |
|              | ding or adding additional Articles, of dditional sheets, if necessary). (Be |   |                            |
|              |   |   |                            |
| provisi      |   | e, reclassification, or cancellation of iss<br>nt if not contained in the amendment i |                            |
|              |   |   |                            |
|              |   |   |                            |
|              |   |   |                            |

| The date of each amendment                           | (s) adoption:   |
|--|---|
| •<br>Effective date <u>if applicable</u> :           | (date of adoption is required)  |
| Effective date <u>il applicable</u> :                | (no more than 90 days after amendment file date)  |
| Adoption of Amendment(s)                             | (CHECK ONE)   |
| The amendment(s) was/web by the shareholders was/web | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.  |
| • •  | re approved by the shareholders through voting groups. The following statement d 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/wer action was not required.    | re adopted by the board of directors without shareholder action and shareholder   |
| The amendment(s) was/wer action was not required.    | re adopted by the incorporators without shareholder action and shareholder  |
| Dated  | 3/7/11  |
| sele   | a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary) |
|  | Thich Diaz (Typed or printed name of person signing)  |
|  | (Title of person signing)   |