P10000082273

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(Address)
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(Document Number)
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Amend Manu Chs Mo 2/24/11

COVER LETTER

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Titan Protective Group, Inc DOCUMENT NUMBER: P10000822 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **■\$43.75** Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (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

Titan Protective Gro (Name of Corporation as currently filed with the			
P1000083373 (Document Number of Corporation			
Pursuant to the provisions of section 607.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	, this Florida Profit Corporation adopts the following		
A. If amending name, enter the new name of the corporation: BRASS Protective Growname must be distinguishable and contain the word "corporabbreviation "Corp.," "Inc.," or Co.," or the designation "Corname must contain the word "chartered," "professional association and the word "chartered," "professional association to the word "corporation" to the word "chartered," "professional association" to the word "charte	ration," "company," or "incorporated" or the pp," "Inc," or "Co". A professional corporation		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	<u>00113</u> Hialeah, FL 33016		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Units Howeah, FL 33016		
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	a street address)		
(City)	, Florida (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			

The date of each amendment(s	adoption: 02-31-3011	
	(date of adoption is required)	
Effective date <u>if applicable</u> :	<u> </u>	
(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted 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 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)	
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
Dated	9-21-2011	
Signature — Review Composition of the following selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)		
	(Typed or printed name of person signing)	
	(Title of person signing)	