P110000027110

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BRANDO CONST	FRUCTION INC	
DOCUMENT NUME	BER: P11000027110		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JAIME GUZMAN		
		Name of Contact Person	n
	BROTHERS MULTISERVI	CIOS INC	
		Firm/ Company	
	2821 SOUTHWEST 119TH	WAY	
		Address	
	MIRAMAR FLORIDA, 330	25	
		City/ State and Zip Cod	e
RRO'	THERSMULTISER VICIOS@	DOMAIL COM	
	`	sed for future annual report	notification)
			,
For further information	concerning this matter, pleas	se call:	
BRANDO CABALLE	ERO	at (305	910-5565
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

TR. JAN -3 PM 3: 35

Articles of Amendment Articles of Incorporation of

BRANDO CONSTRUCTION INC				
(Name o	of Corporation as curren	tly filed with the Florida Dept. of State)		
P11000027110				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	g ameno	dment(s) to
A. If amending name, enter the new na	ime of the corporation:			
N/A			The	new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the action." A professional corporation name must on "P.A."	bbrevia	tion
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		610 SE 12 TERRACE		
		HOMESTEAD FLORIDA		
		33033		_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	=======================================	\$17.16 \$5
			<u> </u>	CHETAN
				-0.4E
D. If amending the registered agent and new registered agent and/or the new			PM	
new registered agent and/or the new registered office address N/A			3: 35	ÄΣ
Name of New Registered Agent			. Ŭ	25
			-	Q3
		trect address)		
New Registered Office Address:	N/A	, Florida		_
		(City) (Zip C	Code)	
New Registered Agent's Signature, if cl	hunging Registered Agen	st·		
		with and accept the obligations of the position.		
	Cirrictions of Mona	Ragistarud Agant 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)

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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		MARLENY J MEJIA MADRID	610 SE 12 TERRACE
X Add				HOMESTEAD FL
Remove				33033
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter of (Attach additional sheets, if necessary). (Be specifically)	range(s) nere.
AMEND PURPOSE OF ORGANIZATION TO "ANY	
······································	
. If an amendment provides for an exchange, reclas	sification, or cancellation of issued shares,
provisions for implementing the amendment if no (if not applicable, indicate N/A)	of contained in the amendment itself:
(y not applicable, maleule 1971)	
	· · · · · · · · · · · · · · · · · · ·
	

The date of each-amendment(s) ad date this document was signed.	option:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
12/10/2017	
Dated	(E),me Au
selected	rector, president or other officer – if directors or officers have not been i, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
	BRANDO CABALLERO
•	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)