P11 0000 39651

(Requestor	's Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Dusings)	
(Business i	Entity Name)
(Document	Number)
Certified Copies C	ertificates of Status
Special Instructions to Filing O	fficer:





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ution: <u>Brabo</u>	x Interno	thonal Corp.
DOCUMENT NUMBI	R: P11000	0039651	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
- - -	Brabox 8351, Dora	Name of Contact Person Therma Firm/ Company Address LFI 331 City/ State and Zip Code	tional Corp.
For further information	concerning this matter, pleas		notification)
Name of	Contact Person	at (<u>305</u> Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment 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)
Amer Divis P.O. I	ng Address dment Section on of Corporations Box 6327 nassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Brabox Tr	ternation	al Corpor	
(Namé of s	Corporation as currently	filed with the Florida Dept.	of State)
<u> </u>	(Document Number of Company)	Corporation (if Impum)	
	(Document Number of C	Corporation (11 known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following amendment(s) t
A. If amending name, enter the new nam	e of the corporation:		
· Ma			The new
name must be distinguishable and contain the "Inc.," or Co.," or the designation "Cor" chartered," "professional association," or	p." "Inc." or "Co". A	mpany," or "incorporated" (professional corporation no	or the abbreviation "Corp.,"
B. Enter new principal office address, if: (Principal office address MUST BE A STR		na	HR
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	(ble: FFICE BOX)	n a	8: 00
D. If amending the registered agent and/ new registered agent and/or the new r		ess in Florida, enter the nan	se of the
Name of New Registered Agent	Ma		
_	(Florida stree	et address)	
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		PL 11
New Registered Office Address:	(0	City)	Florida (Zip Code)
New Registered Agent's Signature, if cha Thereby accept the appointment as registered.		ith and accept the obligations	of the position.
	Signature of New Res	gistered Agent, if changing	
	6		
Check if applicable The amendment(s) is/are being filed pure	suant to s. 607.0120 (11) (c	e), F.S.	

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)

Example:

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.

X Change	<u>PT</u> <u>Johr</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>. X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	_D	Eduardo Guerra De Castro	8351 nw 21st. Doral Fl 33122
Remove 2) Change Add	D	Lucas Guerra De Castro	8351 nw 21st- Doral, Fl 33122
Remove Change			
Add Remove 4) Change Add			
Remove 5) Change Add			
Remove Add Remove			

E. If amending o	or adding additional A	rticles, enter chang	ge(s) here:		
· (Attach additio	onal sheets, if necessary,				
	α				
		<u> </u>			
					
		.=-			
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F. <u>If an amendn</u>	nent provides for an ex	change, reclassific	ation, or cancellat	ion of issued shares,	
provisions fo (if not ap	or implementing the ar oplicable, indicate N/A)	nendment if not co	ontained in the amo	endment itself:	
	\0				
·	100				
			-		
			· · · · · · · · · · · · · · · · · · ·		

	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	ne)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirem partment of State's records.	ients, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The folloeach voting group entitled to vote separately on the amenda	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	[`] `	
	(voting group)	
Dated MC	rch 6,2020	
selecte	rector, president or other officer – if directors or officers ha I, by an incorporator – if in the hands of a receiver, trustee, a ed fiduciary by that fiduciary)	
	Eduardo De Castro (Typed or printed name of person signing)	<u> </u>
	President (Title of person signing)	