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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BR SIDING, INC				
DOCUMENT NUMBER: P11000040520				
The enclosed Articles of Amendment and fee are submitted for filling.				
Please return all correspondence concerning this matter to the following:				
AMELIO A FONSECA				
Name of Contact Person BR SIDING, INC				
Firm/ Company 15819 PENNINGTON RD				
Address TAMPA, FL 33624				
City/ State and Zip Code				
AMELIOAGUIAR@HOTMAIL.COM E-mail address: (to be used for future annual report notification)				
or further information concerning this matter, please call:				
at (813) 965-6165				
Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check-for the following amount made payable to the Florida Department of State:				
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) 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 Circle Tallahassee, FL 32301				

Articles of Amendment to Articles of Incorporation of

to

BR SIDING, INC	
	rently filed with the Florida Dept. of State)
P11000040520	
(Document Numb	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>n:</u>
$a \mid \mathcal{X}$	The new
name must be distinguishable and contain the word "corpor" ("Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered," "professional association," or the abbreviate	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/D
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 and new registered agent and/or the new registered office add	address in Florida, enter the name of the
Name of New Registered Agent	23 E
(Florid	A street address), Florida
New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famile	
Signature of No	N. 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)

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	FERNANDO G DA SILVA	8511 BRIAR GROVE CIR
Add			TAMPA, FL 33615
X Remove			
2) Change	VP	JUAN A DOMINGUEZ GOMEZ	4747 W WATERS AVE
X Add			APT 502
Remove			TAMPA, FL 33614
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
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NIA	
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. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
<i>i</i>	
MA	

	01-06-2018	
The date of each amendment(s) a date this document was signed.	idoption:	, if other than the
•	06-2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this repartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendme ufficient for approval.	nt(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ement ement
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
01-06-201	8	
Dated		
Signature	melin tonsera	
	firector, president or other officer – if directors or officers have not bee	en
selecte	ed, by an incorporator - if in the hands of a receiver, trustee, or other co	
appoir	nted fiduciary by that fiduciary)	
	AMELIO FONSECA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	