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SECRETARY STATE TALL NEW 27 PH 3: 54

Amend

JAN 3 0 2014

T. CARTER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOI	RATION: BROTHERS BER: P1300009431		GROUP CORP		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	MAGDALENA VII	NAS			
	Name of Contact Person BROTHERS CONSULTING GROUP CORP				
	Firm/ Company 2878 WEST 75 TERRACE				
Address HIALEAH, FLORIDA 33018  City/ State and Zip Code					
		sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
MAGDALENA VINAS		at (786	, 356-2780		
Name of Contact Person Area Code &		de & Daytime Telephone Number			
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment 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 Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



14 JAN 27 PH 3: 54

## BROTHERS CONSULTING GROUP CORP.

(Name of Corporation as currently f	filed with the Florida Dept. of State)	
	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment	s) to
A. If amending name, enter the new name of the co	corporation:	
	The new	
	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the e abbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>OX</u> )	
D. If amending the registered agent and/or registered new registered agent and/or the new registered	ered office address in Florida, enter the name of the d office address:	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
	. I am familiar with and accept the obligations of the position.	
Signature of l	New 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: <u>X</u> 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	Address
1) Change	Т	RUBY VERGEL	21320 SW 124 PLACE
Add			MIAMI, FL 33177
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			1
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).		,		
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If an amendment provides for an exc	hange, reclassifica	ition, or cancellat	tion of issued sh	ares,
provisions for implementing the amo (if not applicable, indicate N/A)	endment if not cor	tained in the am	endment itself:	
'A				
			<del></del>	
·			<del></del>	

The date of each amendment(s)	adoption: JANUARY 23, 2014	, if other than the
date this document was signed.		_
Effective date if applicable:	ANUARY 23, 2014	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	idopted 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 ea	ist 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	
·	ARY 23, 2014	
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 pointed fiduciary by that fiduciary)	<del></del>
	MAGDALENA VINAS	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	