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COVER LETTER

TO: Amendment Section Division of Corporations

Brown and As	sociates La	w Firm, F	PA
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are su	ubmitted for fili	ng.	
Please return all correspondence concerning this ma	itter to the follo	wing:	
Romaine Brown			
	Name of Co	ontact Person	1
8551 West Sunrise Bl		Company 00	
Plantation, FL 33322	Ad	dress	
	City/ State	and Zip Cod	e
romainebrown1@gmail.co	om		
E-mail address: (to be u	sed for future a	nnual report	notification)
For further information concerning this matter, please	se call:		
Romaine Brown	at (954	315-1160
Name of Contact Person	· · · · · · · · · · · · · · · · · · ·	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the	Florida Depa	urtment of State:
■ \$35 Filing Fee	S43.75 Fi Certified ((Additional enclosed)	Copy Il copy is	□\$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		Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

BROWN AND ASSOCIATES LAW FIRM, P.A.

(Name of Corporation as currently filed with the I P14000015511	Florida Dept. of State)	_
		
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation: Brown Law, PA		_
name must be distinguishable and contain the word "corporation	on." "company." or "incorporated" or the a	_The new
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or	"Co". A professional corporation name must	
word "chartered," "professional association," or the abbreviation	8551 West Sunrise Blvd	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Suite 300	
		_
	Plantation, FL 33322	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8640 NW 20th Court	
(manning data out manning data out in the manning data	Sunrise, FL 33322	- - ≤o
		- - 호 영향 - - 호 무경
		APR 14
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		HALL TO SERVICE THE CONTRACT OF THE CONTRACT O
Name of New Registered Agent		PMII: 4
		5 30
(Florida st.	reet address)	,
New Registered Office Address:	, Florida	_
(City,) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent		
I hereby accept the appointment as registered agent. I am familiar	wun unu accept the obligations of the position.	
Signature of 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: 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change	 		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			-
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here:			
(Attach additional sheets, if necessary).	(Be specific)		
	· · · · · · · · · · · · · · · · · · ·		
If an amendment provides for an exchange of the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:		
(if not applicable, indicate N/A)	nument it not contained in the amenument resert.		
,			
<u> </u>			

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
_		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	<u> </u>
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
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	
Dated	17/2014 Romaine, Brown	
(By a diselected	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ded fiduciary by that fiduciary)	
	Romaine Brown	
	(Typed or printed name of person signing)	
	Owner	
	(Title of person signing)	