# P14000026787

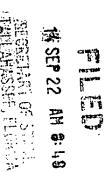
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### **COVER LETTER**

	<i>D</i> ,	( ,, \ , ' ,	e Q along TIV	
NAME OF CORPOR.	ATION: SU	CM2+2W	5 Brollers LNC.	
DOCUMENT NUMBI	ER: P14000	026787	S Brokers TNC.	
The enclosed Articles o	f Amendment and fee are sul	bmitted for filing.		
Please return all corresp	Please return all correspondence concerning this matter to the following:			
	CHRIST	OPHER B	LANC	
		Name of Contac	et Person	
	BY	L Corp		
_		Firm/ Comp	pany	
_	2816	1 NW	112th Avenue  L 33172  Zip Code	
		Address	S	
	$\mathcal{N}$	IAMI F	L 33172	
_		City/ State and 2	Zip Code	
	E-mail address: (to be used for future annual report notification)			
b-mail address. (to be used for fatale annual report notification)				
For further information concerning this matter, please call:				
Chair	21000	ar ( ¬	LOS , 463-9008	
Name of	Contact Person	at (	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copenclosed)	Certificate of Status	

# Mailing Address

TO: Amendment Section

Division of Corporations

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



DI #115-2115 07	NKEDE TA		P 22 AH 8: 48
BL CUSTOMS BR (Name of Corporation as curren	ntly filed with the Florida	Dept. of State Li	<u>CG I Die es .</u>
	P14000026		1531E 1201800
	ber of Corporation (if know		- Operator
rsuant to the provisions of section 607.1006, F	Torida Statutes, this <i>Florid</i>	la Profit Corporation add	opts the following amendment
Articles of Incorporation:			
If amending name, enter the new name of	the corporation:		
me must be distinguishable and contain the	A U		The new
me must be distinguishable and contain the $Corp.$ ," "Inc.," or $Co.$ " or the designation "ord "chartered," "professional association," of	Corp," "Inc," or "Co".	company," or "incorpor A professional corporal	rated" or the abbreviation tion name must contain the
Enter new principal office address, if appli rincipal office address <u>MUST BE A STREET</u>		NA	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		NA	
If amending the registered agent and/or renew registered agent and/or the new registered.		Florida, enter the name	e of the
Name of New Registered Agent	NA		
	(Florida street ada	•	
New Registered Office Address:	N A (City)	, Florida_	(Zip Code)
ew Registered Agent's Signature, if changin hereby accept the appointment as registered ag		nd 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.

e

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>Address</u>
1) Change	_S_	Jose Rodriguez	2814 NW 112th AU Doral FL 33172
Remove		·	
2) Change	<u> </u>		
Add		,	
Remove			
3) Change			
Add			
Remove		. *	<del></del>
4) Change	<del></del>	_	-
Add			
Remove			
5) Change			
Add			
Remove		·	·
6) Change			
Add			
Remove			

	eets, if necessary).	(Be specific)			
	N/A				
	NIX				
					· · · · · · · · · · · · · · · · · · ·
<del> </del>					
			<del>-</del> •		
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				•	
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manialana fan impl	amonting the ama	ndmont if not a	antainad in the a	lation of issued s mendment itself	ihares, <u>:</u>
manialana fan impl	amonting the ama	ndment if not c	ontained in the a	mendment itself	<del>chares,</del> <u>i</u>
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an amendment proprovisions for imple (if not applicable)	amonting the ama	ndment if not c	ontained in the a	mendment itself	hares,

The date of each amendment(s) adoption:	, if other than th
date this document was signed.  Effective date if applicable: 9814	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
Dated 9 8 2014	
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
(Typed or prihted name of person signing)	_
(Title of person signing)	_