## P14000077327

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SECRETARY OF STATE DIVISION OF CORPORATIONS

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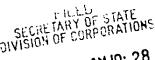
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EYEBROW GOLD CORP				
DOCUMENT NUMBER: P14000077327				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
MIGUEL ANGELO, STEFFAN DE SOUZA				
Name of Contact Person				
EYEBROW GOLD COR				
Firm/ Company				
13531 BISCAYNE BLVD				
Address				
NORTH MIAMI BEACH , FL 33181				
City/ State and Zip Code				
TAXCONTROLLER@HOTMAIL.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
MIGUEL ANGELO STEFFAN DE SOUZA at (305) 509-1311				
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:				
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certificate of Status  (Additional Copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



**EYEBROW GOLD CORP** 

14 HOV 20 AM 10: 28

(Document Number of Corporation (	if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	13531 BISCAYNE BLVD
(Principal office address MUST BE A STREET ADDRESS)	NORTH MIAMI BEACH FL 33181
C. Enter new mailing address, if applicable:	13531 BISCAYNE BLVD
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	NORTH MIAMI BEACH FL 33181
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address	dress in Florida, enter the name of the
Name of New Registered Agent	,
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	, Florida
(City	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	ıt:

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			
Add			
Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pemove			.—

I/A	additional sheets, if necessary)	(Be specific)	
<i>u</i> / \			
		·	
TC -	nendment provides for an ex-	bange, reclassification, or c	ancellation of issued shares.
II an an	nendment provides for an exc ions for implementing the an	endment if not contained in	the amendment itself:
11 an an provisi	not applicable, indicate N/A)		
provisi (if	noi applicable, indicate IVA)		
(if	noi appacaole, maicale IVA)		
(if			
(if	noi applicaole, maicale (vzi)		
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(if	noi applicaole, maicule (VA)		
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It an an provisi	noi appiicaore, maicare (vzi)		
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(if	noi appiicaore, maicare (vzi)		
(if	noi appiicaore, maicare ivis)		
(if	noi appiicaore, maicaie (vzi)		

. The date of each amendment(s) adoption	SECRETARY OF STATE SIVISION OF CORPORATIONS
Effective date if applicable:	DIVISION OF CENT ON TO AM IO: 28
	(no more than 90 days after amendment file date) 14 NOV 20 AM 10: 28
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were adopted b by the shareholders was/were sufficien	y the shareholders. The number of votes cast for the amendment(s) t for approval.
☐ The amendment(s) was/were approved must be separately provided for each v	by the shareholders through voting groups. The following statement 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)
	(voting group)
☐ The amendment(s) was/were adopted b action was not required.	y the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted b action was not required.	y the incorporators without shareholder action and shareholder
Dated 11/10/14	
Signature * M	
Signature // (Byla director	president or other officer – if directors or officers have not been
specified, by a	n incorporator – if in the hands of a receiver, trustee, or other court action by that fiduciary)
MIC	GUEL ANGELO STEFFAN DE SOUZA
	(Typed or printed name of person signing)
VIC	E-PRESIDENT

(Title of person signing)