P140000095114

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Amend

OCT 13 2015 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: We Kick I	Brass, Inc
DOCUMENT NUMBER: P14000095114	
The enclosed Articles of Amendment and f	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Michael Perez	
	Name of Contact Person
We Kick Brass, Inc	
	Firm/ Company
15403 79th CT N	
	Address
Loxahatchee, Florida	a 33470
V	City/ State and Zip Code
wekickbrass@gmail.com	
	: (to be used for future annual report notification)
L-man address.	. (to be used for future annual report horneadon)
For further information concerning this man	tter, please call:
Michael Perez	at (786) 473-7976
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	unt made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	
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

We Kick Brass, Inc	
(Name o	of Corporation as currently filed with the Fiorida Dept. of State)
P14000095114	
	(Document Number of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:
	The new
name must be distinguishable und cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "corporation," "company," or "incorporated" or the abbreviation nation "Corp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S	
C. Enter new mailing address, if applia (Mailing address MAY BE A POST of the Mailing address of the Name of New Registered Agent and Name of New Registered Agent	ad/or registered office address in Florida, enter the name of the
	<u> </u>
	(Florida street address) Loxahatchee 33470
New Registered Office Address:	(City), Florida (Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	
,	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 <math>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	v	Michael Pulver	15403 79th CT N
X Add			Loxahatchee, FL 33470
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 Artic (Attach additional sheets, if necessary).					
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If an amendment provides for an excha	ange, reclassifica	ation, or cance	llation of issued	shares,	
(if not applicable, indicate N/A)	idment if not co	<u>ntained in the a</u>	<u>imendment itsel</u>	<u>f:</u>	
chael Pulver Shall receive 49 shares effect	otive 9/28/2015.	···			
		······································			
		_			

09/28/2015
The date of each amendment(s) adoption:, if other than the date this document was signed.
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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 cast for the amendment(s) was/were sufficient for approval
by" (voting group)
(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 action was not required.
09/28/2015
Dated
Signature
(By a director, president of 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)
Michael A Perez
(Typed or printed name of person signing)
President
(Title of person signing)