## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000064486 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC

Account Number : 120000000019

Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*Enter the email address for this business entity to be used for fiture∽ annual report mailings. Enter only one email address please.\*\*

r-~ : 1	Addrace:			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN ONE BROTHER DISTRIBUTOR, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

#0655 P. 002/005 H15000064486

		,		_	- 1
	Articles of Am to Articles of Incor of		, ,	TATE ARASS	15 HAR 1
ONE BROTHER DISTRI	BUTOR INC.				ω
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		11	3
P15000017792			. <b>-</b>	黑云	0.5
(Document	Number of Corporation (if I	Chown)		350	တ
Pursuant to the provisions of section 607.1 its Articles of Incorporation:  A. If amending name, enter the new name.		orida Profit Corporation edop	ts the followin	g amend	iment(s) to
ONE BROTHER DISTRIE	BUTION INC			The s	naw
name must be distinguishable and continuous "Corp.," "Inc.," or Co.," or the designation of "chartered," "professional associated.  B. Enter new principal office address. if (Principal office address MUST BE A ST)  C. Enter new mailing address. If applied (Mailing address MAY BE A POST C)	ition "Corp," "Inc," or "Cion," or the abbraviation "P.  [applicable:   TREET ADDRESS	o". A professional corporatio	m name musi	contain	the in
D. If amending the repistered agent and new registered agent and/or the new Name of New Registered Agent	d/or registered office addre registered office address: REMAIN THE SA (Florido alvee	ME	of the	-	
New Registered Office Address:		, Florida	·	_	
	(City)		(Zip Code)		
New Registered Apent's Signature, if ch I hereby accept the appointment as regista	nanging Registered Agent: Bred agent. I am familiar wi	th and accept the obligations o	f the position.		
Sig	nature of New Registered As	ent, if changing			1

Page 1 of 4

Remove

## H15000064486

address of each Officer (Attach additional sheet Please note the officer/d P = President; V= Vice Executive Officer; CFO held. President, Treasur Changes should be note a change, Mike Jones le Mike Jones, V as Romon	r and/or ) s, if neces lirector ti e Presider = Chief rer, Direc d in the fi eaves the	Director being added:  Isary)  Isary)  Is by the first letter of the office title  It: T= Treasurer; S= Secretary; D=  Financial Officer. If an officer/dir.  Is would be PTD.  Ollowing manner. Currently John D	ne of each officer/director being removed  : = Director; TR= Trustee; C = Chairman or ector holds more than one title, list the first th	Clerk; CEO = Ch t letter of each offi ted as the V. There
Example: X Change	PI	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith	<b>.</b> .	
Type of Action (Check One)	Title	Name	Address	
1) Change Add Remove 2) Change Add Remove 3) Change Add Remove				
4) Change Add Remove		<u> </u>		
5) Change Add Remove				
6) Change				

15000064486

ttach odditional sheets, if necessar	Articles, enter chause(s) here: 39. (Be specific)		
	NAL REVENUE SERVICE IS	· 47-3110959	
		0114444	
			<del></del>
	·		<u> </u>
		·	<del></del>
<del></del>			
<u> </u>			
			<del></del> -
· · · · · · · · · · · · · · · · · · ·			
<u></u>			_ `
	,		_
			_
an amendment provides for an	xchange, reclassification, or cancella	tion of issued shares.	
rovisions for implementing the s	emendment if not contained in the an	<u>sendment itself:</u>	
(if not applicable, indicate N/A	)	,	
			<del></del>
			-
			<del></del>

Page 3 of 4

03/13/2015 13:32 3052673910

The date of each amendment(s) adoption: March 12, 2015	, if other than	the
date this document was signed.		1
Effective date if applicable: March 12, 2015	_	İ
(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 approvely 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		
(voling 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.		
Dated . 3/12/2015		
Signature  (By a director, president or other officer - if directors or officers have not been	_	
sciented, by an incorporator – if in the hands of a receiver, mustee, or other court appointed fiduciary by that fiduciary)		
TUAN F. GAREIA 507  (Typed or printed name of person signing)  PRESIDENT/DIRECT	plode	ص تح
(Typed or printed name of person signing)	ميه چيپ	
(Title of person signing)		
(vine or hanne administ)		1