## P15000027994

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16 JAN -4 PH 12: 48

JAN # 8 2016 C LEWIS

## **Return Address and Information**

Return Address:
Robert Brannen
4298 Vineyard Cir
Weston, FL 33332

Phone Number – (954) 871-1686

## **COVER LETTER**

TO: Amendment Section

Division of Corporations
OCUMENT NUMBER: P150000 27994
OCUMENT NUMBER: P150000 27794
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
VALTRIA OCHOA  Name of Contact Person
VR Brannen Inc
Firm/ Company  2334 Weston Rd + 138
Weston FL 33326
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
Valevia Ochoa  Name of Contact Person  at (954)  Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing Address  Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

SECRETARY OF STATE DIVISION, OF CORPORATIONS

VR Brannen Inc 16 JAN -4 PM 12: 48 (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and 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)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			<u></u>
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

Page 2 of 4.

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<u> </u>	
N	
<del>-</del>	
****	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption: 12 30	2015	, if other than the
date this document was signed.	F I. L SECRE JARY DIVISION OF CO	Lli OF SYATE DEPARATION:
Effective date <u>if applicable</u> :		
(no more	e than 90 days after amendment file date) 16 JAN -4	PM 12: 48
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendate.	e applicable statutory filing requirements, this date v	
Adoption of Amendment(s) (CHECK ON	<u>E</u> )	
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)	
☐ The amendment(s) was/were approved by the sharehole must be separately provided for each voting group ent		
"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 d action was not required.	irectors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the incorporat action was not required.	ors without shareholder action and shareholder	
Dated 12 30 /2015 Signature 7		
	her officer - if directors or officers have not been	
selected, by ān incorporator - appointed fiduciary by that fi	- if in the hands of a receiver, trustee, or other court	
appointed fractary by that is	j	
VALEIL D	chog	
(Typed or	printed name of person signing)	
VP		
	(Title of person signing)	