P10000045407

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Amend

AUG 23 2017
I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	ATION: FK BRNO US, INC	c	
DOCUMENT NUMB	ER: P16000045407		<u> </u>
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Damah		
•		Name of Contact Person	n
	FK BRNO US, INC.		
		Firm/ Company	
	4000 NW 51st Street		
		Address	
	E-88		
	E-mail address: (10 be us	City/ State and Zip Cod	
For further information	n concerning this matter, pleas	se call:	
Damah		at (de & Daytime Telephone Number
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep:	artment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Ameno Divisio Cliftor	Address Iment Section on of Corporations 1 Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FK BRNO US, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P16000045407 (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) , Florida 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	PT	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	Heather Phalin	4000 NW 51st Street
X Add			E-88
Remove			Gainesville, Florida 32606
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	ticles, enter change(s (Be specific)			
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an amendment provides for an exc	hange, reclassification	on, or cancellation of i	ssued shares,	
	enament it not conta	med in the amendmen	it itse <u>n.</u>	
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
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(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
provisions for implementing the am (if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				
(if not applicable, indicate N/A)				

The date of each amendment(s)	adoption:	, if other than the
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 document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	(s)
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
	ist for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
August S Dated	\$ 2017	
Signature	had ha	
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other conditted fiduciary by that fiduciary)	ırt
	Imad Damah	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	