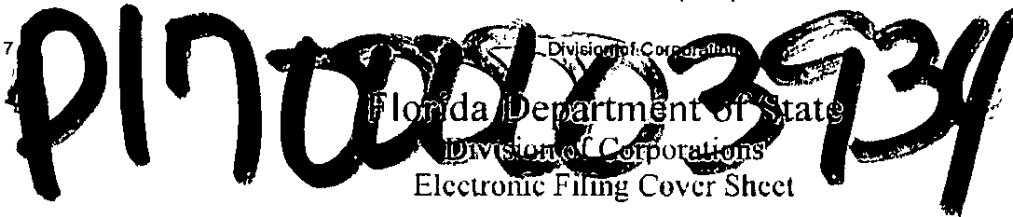


8/9/2017



**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.

(((H17000211335 3)))



H1700021133534BCX

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To: Division of Corporations  
Fax Number : (850)617-6380

From: Account Name : INREP, LLC  
Account Number : 120170000048  
Phone : (954)816-0169  
Fax Number : (954)301-0210

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

Email Address: INREP101@OUTLOOK.COM

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
BROTHERS ACCOUNTING AND MULTISERVICES, INC**

Certificate of Status	0
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**S. YOUNG**  
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August 11, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BROTHERS ACCOUNTING AND MULTISERVICES, INC

12991 NW 1ST ST BLDG 5

203

PEMBROKE PINES, FL 33028

SUBJECT: BROTHERS ACCOUNTING AND MULTISERVICES, INC

REF: P17000003934

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

THE BROTHERS MULTI SERVICES INC - P15000076377

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

FAX Aud. #: H17000211335  
Letter Number: 717A00016423

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314

(((H17000211335 3)))

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: BROTHERS ACCOUNTING AND MULTISERVICES, INC

DOCUMENT NUMBER: P17000003934

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARTIN REYES

Name of Contact Person

INREP, LLC

Firm/ Company

7871 NW 11TH ST

Address

PLANTATION, FL 33322

City/ State and Zip Code

INREP@OUTLOOK.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ISRAEL I GONZALEZ

at ( 954 ) 218-2270

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

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

(((H17000211335 3)))

Articles of Amendment  
to  
Articles of Incorporation  
of

BROTHERS ACCOUNTING AND MULTISERVICES, INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P17000003934

(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:**

BROTHERS MULTISERVICES GROUP INC

*The new 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)

2821 SW 119TH WAY

MIRAMAR FL 33025

**C. Enter new mailing address, if applicable:**(Mailing address MAY BE A POST OFFICE BOX)

2821 SW 119TH WAY

MIRAMAR FL 33025

**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

INREP LLC

7871 NW 11TH ST

(Florida street address)

New Registered Office Address:

PLANTATION

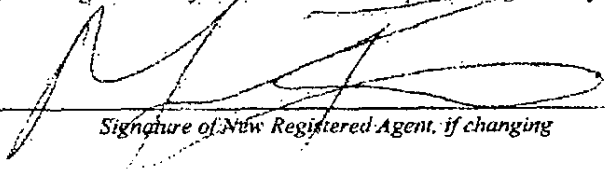
Florida 33322

(City)

(Zip Code)

**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

(((H17000211335 3)))

**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 Doe

X Remove                    V       Mike Jones

X Add                        SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u>	<u>P</u>	<u>ISRAEL GONZALEZ</u>	<u>12991 NW 1ST ST BLDG 5</u>
<u>Add</u>			<u>PEMBROKE PINES, FL 33028</u>
<u>X</u> Remove			
2) <u>Change</u>	<u>P</u>	<u>ISRRAEL I GONZALEZ</u>	<u>2821 SW 119TH WAY</u>
<u>X</u> Add			<u>MIRAMAR FL 33025</u>
<u>Remove</u>			
3) <u>X</u> Change	<u>VP</u>	<u>ISMER GONZALEZ</u>	<u>2821 SW 119TH WAY</u>
<u>Add</u>			<u>MIRAMAR FL 33025</u>
<u>Remove</u>			
4) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
5) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			
6) <u>Change</u>			
<u>Add</u>			
<u>Remove</u>			

(Attach additional sheets, if necessary). (Be specific)

[illegible]

(if not applicable, indicate N/A)

[illegible]

(((H17000211335 3)))

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 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).

- ☒ 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.

08/08/2017  
Dated \_\_\_\_\_

Signature \_\_\_\_\_  
(By a director, president or 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)

ISRRAEL I GONZALEZ

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)