## P1700018067

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TALL AHASSEE EL GORY

## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: \_\_\_\_ Fabre Investments Inc. DOCUMENT NUMBER: P17000018067 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Patrick Fabre Jr. Name of Contact Person Fabre Investments Firm/ Company 12030 ne 16th ave apt 205 Address miami fl 33161 City/ State and Zip Code fabreinvestmentsinc@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: \_ at (786 ) 7316363 Area Code & Daytime Telephone Number Patrick Fabre Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

to

Fabre Investments Inc.					
(Name	of Corporation as currently	v filed with the Florida Dept. of S	<u>State</u> )		
P17000018067					
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this a	Florida Profit Corporation adopts	the following an	ıendm	ent(s)
A. If amending name, enter the new n	ame of the corporation:				
			7%.	e nev	127
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations of the contract of t	nation "Corp," "Inc." or "C	Co". A professional corporation	$\overline{I''}$ or the abbre	viatio	n
B. Enter new principal office address. (Principal office address MUST BE A S					
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			SECHETARY OF TALLAHASSEE	1 1 1   N   1	11 11
D. If amending the registered agent ar	nd/or registered office addre	ess in Florida, enter the name of	the 5	2	
new registered agent and/or the ne				3: 48	
Name of New Registered Agent	Guerdy W. Fabre		), (i)	$\overline{\Phi}$	
	8801 biscayne bld suite 103		<del>7 - 1</del>		
	(Florida stre	et address)			
New Registered Office Address:	Miami shores	. Flor	33138 ida		
	(	City)	(Zip Code)	,	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: vered agent. I am familiar w		• ,		

## 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>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Patrick Fabre Sr.	4647 NW 17th ave
Add X Remove			Miami Fl 33142
2) X Change	P	Patrick Fabre Jr.	12030 NE 16th Apt 205
Add			Miami Fl 33161
Remove 3) Change	sv	Guerdy W. Fabre	8801 biscayne bld suite 103
XAdd	,		Miami shores Fl 33138
Remove			<del></del>
4) Change	_		<del></del>
Add			
5) Change		<del>-</del>	
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
I am removing Patrick Fabre Sr. as president. Changing Patrick Fabre jr from Vice president to president and adding Guerdy			
Fabre as Secratray.			
<del></del>			
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:			
(if not applicable, indicate N/A) N/A			
N/A			

•	08/21/17	
The date of each amendment(s)	adoption:, if other t	han the
date this document was signed.		
N. Effective date if applicable:	A	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.	l as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	et for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
action was not required.		
08/21/17 Dated		
Signature		
(By a	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Patrick Fabre Jr.	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	