P17000035527

(Requestor's Name)
(Address)
,
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600301337346

07/18/17--01008--002 **35.00

SUMFIGRY OF STATE

AVISON MANAGERATIONS

17 UP 17 AMIO: 28

amund

JUL 20 2017 D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: BROOKLYN MO	FOR INC			
DOCUMENT NUMB	ER: P17000035527				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.			
Please return all corresp	oondence concerning this mat	tter to the following:			
I	CHURSHID AHMED				
_		Name of Contact Person			
BROOKLYN MOTOR INC					
-		Firm/ Company			
5	5802 LAKE UNDERHILL R	D			
-	Address				
(ORLANDO FL 32807				
_	-	City/ State and Zip Code	;		
KHUR	SHIDGUJART@GMAILCO	OM .			
-	<u> </u>	ed for future annual report	notification)		
		·			
For further information	concerning this matter, pleas	e call:			
KHURSHID AHMED		917 at (238-2945		
Name of	Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment of State:		
S35 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)		
Amer Divis P.O. I	ing Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clitton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

SECRETARY OF STAIR

Articles of Amendment to Articles of Incorporation of

BROOKI	.YN	MOT	COR.	INC

(Name of Corporation as curren	itly filed with the Florida Dept. of State)		
P17000035527			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the follo	wing amendment(s) t	
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporat" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name nu		
B. Enter new principal office address, if applicable:	610 W STATE RD 434		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	LONGWOOD FL 32750		
		 <u>:</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	610 W STATE RD 434	1 5%	
	LONGWOOD FL 32750		
		-4 SAC	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		F STALL F STALL	
Name of New Registered Agent		7 0 10 Th	
(Florida :	street address)		
New Registered Office Address:	, Florida	Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia.		m.	
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.

X Change	<u>PT</u>	John Do	ne	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	mith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add		_		
Remove				
3) Change		_		
Add				
Remove				
4) Change		_ .		
Add				_
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
-	
	- <u>-</u>
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	and the more contained in the amendment usen:
13	

	07/14/2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.	(14/2017	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac 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 cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
07/14/201 Dated	7	
select	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 need tiduciary by that fiduciary)	
.,	KHURSHID AHMED	
	(Typed or printed name of person signing)	-
	PRESIDENT	
	(Title of person signing)	