P1700092217

(Requestor's Name)			
- Carman Browening, - 11736- Hug Les 19. N - Port Redug, Fix 34668			
(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	isiness Entity Nar	ne)	
,	•	,	
(Document Number)			
Certified Copies	_ Certificate:	s of Status	
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2018 MAY 21 AH II: 40
SECRETARY OF STATE

C. GOLDEN MAY 2.2 2018

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	men Brower Inc.
DOCUMENT NUMBER:	17000092217
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
Carmer 11736- Port Ri E-mail address: (to be us	Name of Contact Person Brower Inc. Pirm/Company US. Hwy 19. North Address Chey. Fla. 34608 City/State and Zip Code con Com 2004 @ Jahoo. Com sed for future annual report notification)
For further information concerning this matter, pleas	se call:
Carmon Knower	<u> 1777</u> , 692.2804
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 & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address SECRETARY STATE And Address Amendment Section STAT 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



April 18, 2018

CARMEN BROWER INC 11736 HIGHWAY US 19 N PORT RICHEY, FL 34668

SUBJECT: CARMEN BROWER INC

Ref. Number: P17000092217

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please list the title(s) of each officer in your document.

Please list the street address of each officer/director.

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.

Letter Number: 718A00007887

Claretha Golden Regulatory Specialist II

www.sunbiz.org

Division of Compositions D.O. DOV 6207 Tellahassas Florida 2021

Articles of Amendment

FILED

Articles of Incorporation

Correct On the Trans	2018 MAY 21 AM 11: 4(
(Name of Corporation as currently filed with the Florida Dep	SECRETARY OF STATE
	"" "TALLAHASSEE. FLORID
(Document Number of Corporation (if known)	
	1 . 4 . 2 10
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> acits Articles of Incorporation:	dopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporation," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 nan new registered agent and/or the new registered office address:	ne of the
Name of New Registered Agent	
Ende O DE MESICIALISEM	
(Florida street address)	
New Registered Office Address:	, Florida
(Cuy)	(Zip Code)
Naw Davietanad Agant's Clamatum of shanning Davietanad Agant.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligation.	s 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.

X Change	<u>PT</u> <u>John</u>	Dog	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP_	William Brower	10749. Alsip Street
Add			New Post Richer. F1 34654
Remove			334937
2) Change	<u>C</u> p_	KRISHA MONIO E	1749-Sernihole
Add			Numport Ridg For 34684
Remove			
3) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Кетоуе			

f amending or adding addition of the famential of the familiary of the fam	essary). (Be speci	fic)			
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an amendment provides for	the amendment if n				
(if not applicable, indicate	e (va)				
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The date of each amendment(s) adoption:	<u>5-[7-2018</u>	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	<u> </u>	
(no me	ore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State's r		late will not be listed as the
Adoption of Amendment(s) (CHECK O	<u>(NE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for approval		t(s)
☐ The amendment(s) was/were approved by the sharehomust be separately provided for each voting group e		nent
"The number of votes cast for the amendment(s	s) was/were sufficient for approval	
by		
(voting grou	up)	
☐ The amendment(s) was/were adopted by the board of action was not required.	directors without shareholder action and sharehold	der
☐ The amendment(s) was/were adopted by the incorpor action was not required.	rators without shareholder action and shareholder	
Dated	2018	
Signature	Lower	
(By a director, president or	other officer - if directors or officers have not been	
selected, by an incorporator appointed fiduciary by that	 r – if in the hands of a receiver, trustee, or other confiduciary) 	urt
appoints transmit by said		
<u></u>	Carmen Krower	
(Typed c	or printed name of person signing)	
	Desidet	
	(Title of person signing)	· —————