# P180000 14682

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(Ad	dress)	<del></del>
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	·
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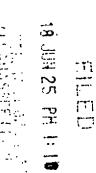
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Danell Brows Corp	<b>)</b> .	
	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Andrew Atkins, Esq.		
		Name of Contact Person	1
	Shevlin & Atkins, Attorneys	at Law	
		Firm/ Company	
	1111 Kane Concourse, Suit e	619	
		Address	
	Bay Harbor Islands, FL 3315	4	
		City/ State and Zip Code	C
andre	w@shevlinatkins.com		
<del></del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Andrew Atkins		at ( <u>305</u>	868-0304
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	riment of State:
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
	endment Section	Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327			on on Corporations Building
	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Danell Brows Corp	
(Name of Corporation as current	tly filed with the Florida Dept. of State)
P18000019682	
(Document Number o	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts 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 "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST_BE A STREET_ADDRESS</u> )	<u></u>
	28
C. Fatanana and the address of and taken	
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 add new registered agent and/or the new registered office addres	
new registered agent and/or the new registered office addres	<u>5:</u>
Name of New Registered Agent	
(Florida st	reet address)
V 10 1 100 111	N
New Registered Office Address:	, Florida
	(44) =
New Registered Agent's Signature, if changing Registered Agent	t:
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Signature of New 1	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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Luz D. Pedroza Duque	16800 SW 137th Avenue
X Add			Suite 1138
Remove			Miami, FL 33177
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4			
4) Change		<del>-</del>	<u></u> .
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artical Attach additional sheets, if necessary).	(Be specific)
	······································
	<del> </del>
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	· <del></del>

e or each amendment(s): document was signed.	acoption:
e date if applicable:	
t date it appliedore.	(no more than 90 days after amendment file date)
	block does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
n of Amendment(s)	(CHECK ONE)
mendment(s) was/were ad ne shareholders was/were s	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	et for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
amendment(s) was/were as n was not required.	dopted by the board of directors without shareholder action and shareholder
amendment(s) was/were as n was not required.	dopted by the incorporators without shareholder action and shareholder
Dared	6/21/2018
	director, president or other officer - if directors or officers have not been
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court med fiduciary by that fiduciary)
	Luz D. Pedroza Duque
	(Typed or printed name of person signing)
	President
	(Title of person signing)