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: (407)900-5054

Fax Number

: (407)517-4931

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COR AMND/RESTATE/CORRECT OR O/D RESIGN EMBER BROOK RETAIL, INC.

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S. YOUNG

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Help

COVER LETTER

TO: Amendment Sei Division of Cor			,
NAME OF CORPO	ORATION: Ember Brook Ret	ail, Inc	
	IBER: P18000041115		
The enclosed Article.	s of Amendment and fee are s	ubmitted for filing.	
Please return al! corre	espondence concerning this m	atter to the following:	
	Sarah Gulati		
		Name of Contact Perso	en e
	Gulati Law, P.L.		·
		Firm/ Company	
	479 Montgomery Place		
		Address	
	Altamonte Springs, FL 3271	4	
		City/ State and Zip Coc	le
Offic	æ@gulatilaw.com		
		sed for future annual report	notifications
	(15 02 1	out for fainte miniaur report	indiffication)
For further information	n concerning this matter, plea	se call:	
Sarah Gulati		at (407	900-5054
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	irtment of Stale:
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)
Ame Divi P.O.	iling Address endment Section ision of Corporations . Box 6327 ahassec, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as carrently filed wit	h the Florida Dept. of State)
P18000041115	
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Prits Articles of Incorporation:	afit Corporation adopts the following amendment(s)
A. If unsending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "comp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pi word "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing uddress MAY BE A POST OFFICE BOX)	ALLA IAS
). If amending the registered agent and/or registered office address in Flor new registered agent and/or the new registered office address:	ida, enter the name of the
Name of New Registered Agent	ઝ
(Florida street address)	
	, Florida
New Registered Office Address:	

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 tule 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	PT Joh	ın Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> Sal	ly Smith	
Type of Action (Check One)	<u>Titl</u> e	Name	<u>Açkin y</u> s
1) Change	V	Navject Khela	479 Montgomery Place
X Add			Altamonte Springs.FL 32714
Kernove		·	
2) Change			
Add		•	
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			· • · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			

	idding additional Arti I sheets, if necessary).	(Be specific)		
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an amendment	provides for an excha	nge, reclassification, or	cancellation of issued sha	res.
	<u>iplementing</u> the amend	dment if not contained in	the amendment itself;	
rovisions for in	able, indicase N/A)			
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The date of each amendment(s) adoption: $36/209$ date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inscried in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	Il nor be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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.	
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)	
NAWRET EHELA	
(Typed or primed name of person signing)	
(Title of person signing)	
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