P1800041106

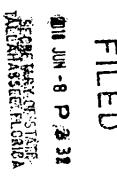
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JUN 1 L 2013 T. LENGEUX M

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPO	ORATION: Brown Family's Se	ervices & Porducts INC	
DOCUMENT NUM	DISMYMMATM		
The enclosed Article	s of Amendment and fee are su	ubmitted for filing.	
Please return all corr	respondence concerning this ma	itter to the following:	
	Jacob Brown		
		Name of Contact Person	1
	Brown Family's Services &	Porducts INC	
		Firm/ Company	
	1383 Four Seasons Blvd		
		Address	
	Tampa, FL. 33613		
		City/ State and Zip Code	е
bro	wn.family.services.and.product	s@gmail.com	
	E-mail address: (to be u	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
Jacob Brown		at (774-2467
Name	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 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)
М	ailing Address	Street	Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Brown Family's Services & Porducts INC

(Name o	of Corporation as currently	v filed with the Florida Dept. of State	
P180004416			,
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this a	Florida Profit Corporation adopts the f	following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
Brown Family's Services & Products INC			The new
"Corp.," "Inc.," or Co.," or the design	Address: Oducts INC The new and contain the word "corporation," "company," or "incorporated" or the abbreviation the designation "Corp," "Inc." or "Co". A professional corporation name must contain the al association," or the abbreviation "P.A." Address, if applicable: The A STREET ADDRESS N/A A POST OFFICE BOX N/A I agent and/or registered office address in Florida, enter the name of the or the new registered office address: W/A (Florida street address) (City) (Zip Code) Address: Address: Address: I am familiar with and accept the obligations of the or the applicant. I am registered agent. I am familiar with and accept the obligations of the or the or the or the or the or the new registered agent. I am familiar with and accept the obligations of the or the new registered agent. I am familiar with and accept the obligations of the or the o		
B. Enter new principal office address,		N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
<u> </u>			
		· " "	···
		<u>-</u>	
Name of New Registered Agent			
	(Florida str	eet address)	
No. B. Samuel Office Allacon	N/A	Clorida	
New Registered Office Address:			(Zip Code)
			£ ≜
No. 10	b		<u>آ</u> ا
			44 ·
			g " M
		和0	
	Signature of New R	egistered Agent, if changing	<u>~ ₩</u>

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 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>	Address
1) Change	VP	Paola Torres	1383 Four Seasons Blvd
Add			Tampa, FL 33613
X Remove			
2) Change	VP	Paola Rivera Torres	1383 Four Seasons Blvd
Add			Tampa, FL. 33613
X Remove			
3) Change	VP	Genevieve R Brown-Souza	1383 Four Seasons Blvd
_XAdd			Tampa. FL. 33613
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
/A	
	
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	a company of the comp
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an and an
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
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(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:

	May 30, 2018	
The date of each amendment(, if other than th
date this document was signed.	•	
	May 30, 2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date very department of State's records.	will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	e adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder	
May : Dated	80. 2018	
Signature	y a director, president or other officer – if directors or officers have not been	_ _
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	(Title of person signing)	