P18000067627

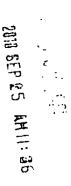
(Requestor's Name)
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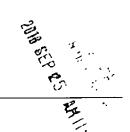
09/25/18--01008--007 **85.00



COVER LETTER

		COVERLETTER	
TO: Amendment Secti Division of Corpo			THIS SEP ILS BAIL 36
	BRICKELL STA	TION CORP	S
	ATION: BRICKELL STA		
DOCUMENT NUMB	ER: P18000067627		(A 40)
The enclosed Articles of	of Amendment and fee are su	abmitted for filing.	7
Please return all corres	pondence concerning this ma	atter to the following:	,
	ATIENZA, EDUARDO		
-		Name of Contact Person	_
	BRICKELL STATION COF	RP.	
-		Firm/ Company	_
	720 SW 2ND AVE		
-		Address	
	MIAMI, FL 33130		
-		City/ State and Zip Code	
	E-mail address: (to be u	sed for future annual report notification)	
For further information	concerning this matter, pleas	se call:	
		at ()	
Name o	f Contact Person	Area Code & Daytime Telephone Numl	per
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)	
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



BRICKELL STATION CORP.

·	n as currently filed with the Florida Dept. of State)	
000067627		Ex.
(Docume	ent Number of Corporation (if known)	
uant to the provisions of section 607.1006, Florida rticles of Incorporation;	Statutes, this Florida Profit Corporation adopts the followin	g amendment
f amending name, enter the new name of the cor	poration:	
		The new
e must be distinguishable and contain the word rp.," "Inc.," or Co.," or the designation "Corp," I "chartered," "professional association," or the a	"corporation," "company," or "incorporated" or the a ""Inc," or "Co". A professional corporation name must abbreviation "P.A."	bbreviation contain the
nter new principal office address, if applicable:		
ncipal office address <u>MUST BE A STREET ADDI</u>	RESS)	
	<u> </u>	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX	4	
Statung address SIAT BE A FOST OFFICE BOX		
		
	ed office address in Florida, enter the name of the	
new registered agent and/or the new registered o		-
new registered agent and/or the new registered o		
new registered agent and/or the new registered o	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 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D		MANUEL ALEGRIA	720 SW 2ND AVE
X Add				MIAMI, FL 33130
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		<u> </u>
Add				
Remove				
4) Change				
Add				
Remove				·
5) Change				<u>. </u>
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessa	Articles, enter- ry). (Be specij	(ic)			
				<u> </u>	
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	<u>. </u>				
					
		_			
f an amendment provides for an provisions for implementing the	exchange, recla	ssification, or c	<u>cancellation of</u> the amendme	<u>issued shares.</u> nt itself:	
(if not applicable, indicate No	4)	or contained to			
					<u> </u>
			-		
				_	
	_				
		 -		.	
				<u> </u>	
					

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		<u> </u>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departm	does not meet the applicable statutory filing requirements, this danent of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(ent for approval.	s)
☐ The amendment(s) was/were approved must be separately provided for each	d by the shareholders through voting groups. The following statem voting group entitled to vote separately on the amendment(s):	ent
	ne amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
9/20/18 Dated	: 	
Signature & din	in & atting-	
(By a directon selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other conductory by that fiduciary)	
EDU	JARDO ATIENZA	
	(Typed or printed name of person signing)	
DIR	ECTOR	
	(Title of person signing)	