## P19000055611

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BROTHERS MAS	ONRY INC	
DOCUMENT NUMBER: P19000055611		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
OSCAR HERNANDEZ ARG	RUETA	
<del></del>	Name of Contact Persor	1
TAXES 4 LESS INC	Name of Confident Clook	•
•	Firm/ Company	
1296 N MILITARY TRAIL	, ,	
•	Address	
WEST PALM BEACH FL 33	3409	
<del></del>	City/ State and Zip Code	2
oscarargueta667@gmail.com		
E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, pleas OSCAR HERNANDEZ ARGUETA		584-3812
Name of Contact Person	at (561	)
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fec Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## Articles of Amendment Articles of Incorporation

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P19000055611	
(Document Number	of Comoration (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporal "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	· "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A 29
	N/A 2 2 C
	N/A 6.
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office address	
Name of New Registered Agent	
	street address)
V/Δ	
New Registered Office Address:	, Florida

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations 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.

Example: X Change	<u>PT</u>	John Do	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	MARLON O HERNANDEZ ARGUI	2099 HAVERHILL CT
Add				WEST PALM BEACH FL 33415
X Remove				
2) Change		_		<del></del>
Add				
Remove				
3 ) Change	<del></del>	_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

/A	dditional sheets, if necessary	y			
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<u>If an an</u>	nendment provides for an e	vchange, reclassific	cation, or cancel <u>la</u>	tion <u>of issued s</u> hare	<u>es.</u>
	ons for implementing the a		ontained in the am	endment itself:	
	not applicable, indicate N/A	)			
/A					
					•

	08/27/2019	
The date of each amendment(s	) adoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	et.
"The number of votes of	rast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/27/2 Dated	019	
Signature (B)	a director, president or other officer - if directors or officers have not been	
sel	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	OSCAR D HERNANDEZ ARGUETA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	