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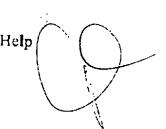
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COR AMND/RESTATE/CORRECT OR O/D RESIGN BROTHERS CUSTOMS FABRICATORS, CORP

| Certificate of Status | 0 |
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Electronic Filing Menu

Corporate Filing Menu



Articles of Amendment to Articles of Incorporation

| | | ncorpuration of | | |
|--|--|-------------------------|--|--------------------|
| | BROTHERS CUSTOM | S FABRICATORS, CO | ORP | |
| (Name | of Corporation as curren | | | |
| | | 20000017550 |) | |
| | (Document Number | of Corporation (if kno | wn) | |
| Pursuant to the provisions of section 607, its Articles of Incorporation: | | | | wing amendment(s): |
| A. If amending name, enter the new pa | me of the corporation: | | | ~ |
| N/A | | | w. | 023 |
| name must be distinguishable and contain "inc.," or Co.," or the designation "C "chartered," "professional association," | | | poruted" or the abbrevio Tallon name must con | ation "Corp." |
| B. Enter new principal office undress, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>) | | N/A | ÷ , | |
| • | | | | ب ب |
| | | | | . 03 |
| C. Enter new mailing address, if applied (Mulling address MAY BE A POST Q | able: FFICE BOX | N/A | | |
| | | | | |
| If amending the registered agent and new registered agent and/or the new | for registered office addi- registered office address | ress in Florida, enter | the name of the | |
| Name of New Registared Agent | N/A | - | | |
| | | | | _ |
| - | (Florida stre | rei uddress) | | _ |
| New Registered Office Address: | N/A | • | | |
| | | СіўУ | , Florida /Zip | Cone; |
| | | | | |
| rw Registered Agent's Signature, if cha | nuing Repletered Agent. | | | |
| hereby accept the appointment as registere | ed agent I am familier w | un and accept the obli | gations of the position. | |
| | | | . , | |
| | | | | |
| | Signature of New Re- | kistered Agent, if chan | nin - | _ |
| heck if applicable | 5 | ком на прет, у спач | žiuž | |
| and apprendic | | | | |

^[] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

(Anuch 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, CirO = Chief Financial Officer. If an officeridirector holds more than one title, list the first letter of each office hold. President, Treasurar, 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 Icaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc. PT as a Change. Mike Jones, F as Remove, and Sally Smith, SV as an Add Example:

| X Change | 27 | John Doe | |
|----------------------------|----------------------|-----------------|--------------------------|
| X Remove | $\overline{\Lambda}$ | Mike Jones | |
| <u>X</u> Add | <u>\$V</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | Address 2023 |
| I) Change | YP | DAVID GUTIERREZ | 183 NW 66TH CT 🗦 🖺 |
| Add | | | FORT LAUDERDALETTL 33389 |
| X Remove | | | . 23 |
| 2) Change | | | |
| LbA | | | |
| Remove Change | - | | |
| Add | | | |
| Remove | | | |
| 41 Change | | | |
| Aad | | | |
| Remove | | | |
| S,Change | | | |
| | | | |
| Remove | | | |
| i) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |

| N/A | | |
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| If an amendment provides for an exchange, reclassification, or cancellation of issued s | hares. | |
| If an amendment provides for an exchange, reclassification, or cancellation of issued s provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate 8/4) | hares. | |
| If an amendment provides for an exchange, reclassification, or cancellation of issued so provisions for implementing the amendment if not contained in the amendment itself (if not applicable, indicate 874) | <u>hares,</u> <u>:</u> | |
| | hares, <u>:</u> | |
| (if not applicable, indicate 2014) | hares, E | |
| (if not applicable, indicate 2014) | hares, | |
| (if not applicable, indicate 2014) | hares, E | |
| (if not applicable, indicate 2014) | hares, | |
| (if not applicable, indicate 2014) | hares, | |
| (if not applicable, indicate 2014) | hares, | |

| The date of each amendment(s) ac date this document was signed. | option: | if other than the |
|--|---|---|
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file | daie) |
| Note: If the date inserted in this bidocument's effective date on the De | ock does not meet the applicable statutory filing require ariment of State's records. | ements, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopaction was not required. | ted by the incorporators, or board of directors without sk | nareholder action and shareholder |
| The amendment(s) was/were adop by the shareholders was/were suf | ted by the shareholders. The number of votes cast for the | ie amendment(s) |
| , and the second | oved by the shareholders through voting groups. The fall ach vating group entitled to vote separately on the amend | dowing statement 223 |
| by | r the amendment(s) was/were sufficient for approval | JN 2 |
| | (voiling group) | |
| Dated | 3/2023 | AH 9: 03 |
| se rected. | otor, president or other officer - if directors or officers here on incorporator - if in the hands of a receiver, trustee, fiduciary by that fiduciary) | |
| | IUAN MANUEL GUTIERREZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |