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R. WHATE

JUN 20 2020

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: NBR, INC			
, DOCUMENT NUMB	P20000030150			
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.		
Please return all corresp	oondence concerning this ma	itter to the following:		
	PETER CHRISTOPHER			
-	Name of Contact Person			
-		Firm/ Company		
	4330 HILLCREST DR #919			
		Address		
1	HOLLYWOOD, FL 33021			
		City/ State and Zip Cod	e	
I	NBRDESIGNSINC@GMAI	L.COM		
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, plea	se call:		
RAYMOND THOMAS		at (302	598-9280	
Name of Contact Person		Area Co	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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NBR, INC	
(Name of Corporation	n as currently filed with the Florida Dept. of State)
20000030159	
(Documen	ent Number of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Se s Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the corp	poration:
	The new poration, ""company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word iation "P.A."
. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE	RESS)
The part of the control of the contr	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	•
. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
ren registeren egisteren egisteren eta	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I a	tered Agent: am familiar with and accept the obligations of the position.
	and the second s
Signatui	ure of New Registered Agent, if changing
heck if applicable	
The amendment(s) is/are being filed pursuant to s. 607	97.0120 (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:

(Attach additional sheets, if necessary)

Example:

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	CFO	RAYMOND THOMAS	4330 HILLCREST DR
X Add			#919
Remove			HOLLYWOOD, FL 33021
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	nal sheets, if necessar	y). (Be specific)			
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an amendm	ent provides for an e	vehanaa raelassifi	cation or cancalla	ion of icenad charac	
	r implementing the a	mendment if not c	ontained in the am	endment itself:	L
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The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file dat	e)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requireme Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without share	holder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the ar sufficient for approval.	mendment(s)
	pproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amendme	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
06/03/20 Dated	20	
Signature	by Thr	
(By a selec	director, president or other officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)	
	RAYMOND THOMAS	
	(Typed or printed name of person signing)	
	CHIEF FINANCIAL OFFICER	
	(Title of person signing)	