P210000 64340

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: BRANCO AUTO I	DETAIL INC				
DOCUMENT NUME	P21000064340					
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.				
Please return all corres	spondence concerning this ma	tter to the following:				
	FERREIRA DA SILVA, VA	LDEVINO				
	Name of Contact Person					
	Firm/ Company					
	5055 WILES ROAD #107					
	COCONUT CREEK, FL 330	73				
		City/ State and Zip Code				
	agents@mattosinsurance.com	1				
	E-mail address: (to be us	sed for future annual report	notification)			
For further informatio	n concerning this matter, pleas	862	763-8083			
	of Contact Person	at (_)			
	r the following amount made					
S35 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)			
Ame Divi P.O.	ding Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Division The C 2415 i	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assec, FL 32303			

Articles of Amendment to Articles of Incorporation of

BRANCO AUTO DETAIL INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P21000064340	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	2021 10: 19
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9 F
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	vet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	rith and accept the obligations of the position.
Signature of New Re	egistered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name 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= E Executive Officer; CFO = Chief Financial Officer. If an officer/director President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe a change, Mike Jones leaves the corporation, Sally Smith is named the Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Can you please remove and only one Dresident,

Bacuse it was doubled held. He have.

Example: XChange	<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	S	RAMALHO, ALEXANDRE	133 NW 4154 WAY				
Add X Remove			DEFRATELO PEACH, FI, 33442				
2) Change	P	FERREIRA DA SILVA, VALDEVINO	SOSS WILES RD # 10+				
Add			(OCCUPY (BEEK, FU, 330)3				
Remove Change							
Add							
Remove							
4) Change		_					
Add							
Remove							
5) Change							
Add							
Remove							
6) Change							
Add							
Remove							

	r adding additional Ar	. (Be specific)			
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fan amand-	ient provides for an exc	change, reclassificat	tion, or cancellation	of issued shares,	
ı alı ailitlidili	r implementing the an	nendment if not con	tained in the amend	iment itself:	
provisions fo	plicable, indicate N/A)				
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The date of each a		s) adoption:	071141	2021	, if other th	ian the
Effective date if a	_	(no r	07 14 nore than 90 days		ı file date)	
		is block does not mee Department of State'		tatutory filing re	quirements, this date will not be listed	as the
Adoption of Ame	ndment(s)	(CHECK	ONE)			
The amendmen action was not		adopted by the incorp	orators, or board o	of directors with	out shareholder action and shareholder	
		adopted by the sharel e sufficient for approv		per of votes cast	for the amendment(s)	
		approved by the share for each voting group			ne following statement amendment(s):	
"The nun	nber of votes	cast for the amendmen	t(s) was/were suff	icient for approv	al	
by		(voting gr			_," '	
		(voting gr	оир)			
	Dated	07/14/20	21			
	Signature	OMIU SOJAV	Fermina	00 5,	<u> </u>	
	(By sele	a director, president ceeted, by an incorpora sointed fiduciary by th	r other officer – if for – if in the hand	directors or offi	cers have not been	
		J.AUDE	VINO PERI	EIRA DA	SILUA	
		(Турес	l or printed name of	of person signing	(1)	
			P			
		(Title	of person signing)			