P94000004639

(Requestor's Name)
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(City/State/Zip/Phone #)
(Sit) Carlot Epit Holic II)
PICK-UP WAIT MAIL
(Duginage Entity Name)
(Business Entity Name)
(Document Number)
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JUN 0.3 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Brother & Sister Corp DOCUMENT NUMBER: P9400000 4639
The enclosed Articles of Amendment and fee are submitted for filling.
Please return all correspondence concerning this matter to the following:
Luis Hernandez
Brother & sister Curp
1458 Washing for ALR
Miami Beach F133/39
City/ State and Zip Zode
Ilvis 1727 a) hotmail. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Luis Hernander at 239, 961-77/0 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

Articles of Amendment

•	to
, \ , A	Articles of Incorporation
\mathcal{D}	of
brother & s	515 ter COrp
(Name of Corporation as currently file	ed with the Florida Dept. of State)
P940000	4639
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the con	rporation:
	The new
word "chartered," "professional association," or the a B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	RESS
D. If amending the registered agent and/or registered new registered agent and/or the new registered of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

(City)

74 HAY 20 PH 1: 9

(Zip Code)

to

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 <math>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	ones .			
X Add	<u>sv</u>	Sally Sr	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>	ר	Name Name	11	Address	100
1) Change	19	_	Daniel	Hernandez	1400 004301/19	, 0
Add Remove					1458 Washing ALC M.B. Fl 33139	
2) Change		_				
Remove						
3) Change						
Add Remove						
4) Change		_				
Add Remove						
5) Change		_				
Add						
Remove						
6) Change		_		·		
Remove						

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
······································	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amei	numerate it not contained in the amendment riser.
<u>provisions for implementing the ame</u> (if not applicable, indicate N/A)	nument is not contained in the amendment reser-
(if not applicable, indicate N/A)	
or implementing the ame (if not applicable, indicate N/A)	
or implementing the ame (if not applicable, indicate N/A)	
or implementing the ame (if not applicable, indicate N/A)	
or implementing the ame (if not applicable, indicate N/A)	
or implementing the ame (if not applicable, indicate N/A)	

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 date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 05/10/20/	
Signature Jey /	
(By a director, president or other officer – if directors or officers have not been	
selected by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Luis Hernandez	
(Typed or printed name of person signing)	
President	
(Title of person signing)	