# 5000078287

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	·
(Cit	ty/State/Zip/Phone	· #)
PICK-UP		MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1

Office Use Only

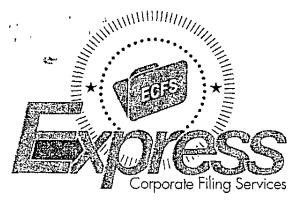


100215228171

12/29/11--01008--026 \*\*175.00

DEC 29 2011

**EXAMINER** 



1000 Ponce de Leon Blvd. Suite: 101 Coral Gables, FL 33134

Phone: 305 444 4994

Email- filing@ecfsfiling.com

OFFICE USE ONLY
-----------------

### CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

(90nbros G	Proup Corporation	
(Corporation Name)	(Document #)	
(Corporation Name)	(Document #)	
(Corporation Name)	· (Document #)	
(Corporation Name)	(Document ≇)	
Walk in Pick up time	e Certified Copy	
Mail out Will wait	Photocopy Certificate of Status	
NEW FILINGS	MENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
	Dissolution/Withdrawal	
Domestication	Dissolution/Withdrawal	

OTHER FILINGS		
	Annual Report	
	Fictitious Name	
	Name Reservation	

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initials	

#### **Articles of Amendment** Articles of Incorporation

## **GONBROS GROUP CORPORATION**

#### (Name of Corporation as currently filed with the Florida Dept. of State) P95000078287

(Document Number	er of Corporation (if	`known)			
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	orida Statutes, this I	Florida Profit Corp	poration adopts the foll	owing amen	dment(s) to
A. If amending name, enter the new name of the	e corporation:				
				The	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Torp," "Inc," or "C	Co". A profession			
B. Enter new principal office address, if applic					
(Principal office address MUST BE A STREET	ADDRESS )		,		.t- <u>-</u>
					<u>Eu</u>
				_ 2	
C. Enter new mailing address, if applicable:	P.O.I.S			3.	
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u> )			<u> </u>	875
					390
		<del></del>		<u> </u>	<b>海监</b> 石里
D. If amending the registered agent and/or regi	stered office addra	ess in Florida, ente	er the name of the	Ó	夏雨
new registered agent and/or the new register					
Name of New Registered Agent					
<del></del>	(Florida stree	et address)			
New Registered Office Address:			. Florida		
	(City)		Zip Code	<del></del>	
Name Danish and Associate Co.	D 14 14 4	-			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent		ith and accept the c	obligations of the positi	ion.	
Signature o	f New Registered Ag	gent, 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> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add _XX Remove	PD	NICOLAS J. GONZALES	8223 NW 66th STREET MIAMI, FL 33166
2) XX Change Add Remove	PVSTD	ANDRE J. GONZALES	8223 NW 66th STREET MIAMI, FL 33166
3 ) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove		•	
6) Change Add Remove			

(attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
00 %	

The date of each amendment(s) a	doption: DEC. 27, 2011
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated DEC.	27, 2011
	irector, president or other officer – if directors or officers have not been
	d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)
	ANDRE J. GONZALES
	(Typed or printed name of person signing)
	S/D
	(Title of person signing)