P97000047077

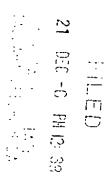
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T. LEMIEUX DEC 2 1 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	:BRILLE	ET INC			
	7000047077			_	
The enclosed Articles of Amen	dment and fee are sub	omitted for filin	g.		
Please return all correspondenc	e concerning this mat	ter to the follov	ving:		
PASCA	L BEAUDICHON				
		Name of Co	ntact Person		_
		Firm/ Co	ompany		
20803 B	ISCAYNE BLVD SU	JITE 440			
		Add	ress		
AVENT	URA, FL, 33180				
		City/ State at	nd Zip Code		
fabrice@	jmcheonsultingusa.co	om			
E-n	nail address: (to be us	ed for future an	nual report	notification)	
For further information concern	ing this matter, pleas				
PASCAL BEAUDICHON	at (_	786	_)		
Name of Contac		Area Cod	le & Daytime Telephone Num	ber	
Enclosed is a check for the following	owing amount made p	payable to the F	lorida Depa	rtment of State:	
-	43.75 Filing Fee & ertificate of Status	S43.75 Fili Certified C (Additional enclosed)	ору	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Add Amendment Division of C P.O. Box 632 Tallahassee.	Section forporations 7		Amenda Division The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303	

Articles of Amendment to Articles of Incorporation of

THOMAS BRILLET INC			
(Name of Corpo	ration as currently filed with the Florida Dept. of State)	
P97000047077			
(Do	ocument Number of Corporation (if known)		
ursuant to the provisions of section 607.1006, Flo s Articles of Incorporation:	orida Statutes, this Florida Profit Corporation adopts the f	ollowing amen	dment(
If amending name, enter the new name of th	ne corporation:		
	I "corporation," "company," or "incorporated" or the abb Inc," or "Co". A professional corporation name must bbreviation "P.A."		rp., ''
B. Enter new principal office address, if applications of the principal office address MUST BE A STREET A			
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)		_ _
		· · · · · · 21	
		:• : 5	_
 If amending the registered agent and/or reg new registered agent and/or the new registe 	istered office address in Florida, enter the name of the		
new registered agent and/or the new registe	reg ornce address.		
Name of New Registered Agent			
			<u> </u>
	(Florida street address)		
New Registered Office Address:	, Florida	i ü	
Then Registered Office Addition,	(City)	(Zip Code)	
ew Registered Agent's Signature, if changing	Registered Agent:		
пегену ассері іне арронітені ах гедізіегей адеі	nt. I am familiar with and accept the obligations of the po	sition.	
	Signature of New Registered Agent, if changing		

Check if applicable

☐ 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:

(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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	T	ANKA DORIS KOPPER	331 SEAMAN AVE
Add X Remove			OPA LOCKA, FL, 33054
Remove 2) Change			
Add			
Remove Change			<u></u>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary),	icles, enter change(s) here: (Be specific)
	· · · · · · · · · · · · · · · · · · ·
<u></u> -	
	
 -	-
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y nor apprendic, marcure 10.1)	

•

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file dat	(e)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirement partment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the a fficient for approval.	mendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amendm	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DECEMBE Dated	R 2 2021	
Signature	- saudelie	
(By a di	rector, president or other officer = if directors or officers hav	e not been
	by an incorporator – if in the hands of a receiver, trustee, or ed fiduciary by that fiduciary)	Tother court
	PASCAL BEAUDICHAN	
•	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	