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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	1110N:	d M. Brandwein, P.A.	
DOCUMENT NUMBE	R:		
	"Amendment and fee are su	bmitted for filing.	
Please return all correspondent	ondence concerning this ma	tter to the following:	
D	avid Brandwein		
_		Name of Contact Pers	Son
L	aw Offices David M. Bran	idwein. P.A.	
		Firm/ Company	
3	11 SE 10 Court	rimiv Company	
_		Address	
F	ort Lauderdale, FL 33316		
<u>-</u>		City/ State and Zip Co	ud v
		City/ state and Zip Ct	Ate .
davidb	randwein@earthlink.net		
	E-mail address: (to be us	sed for future annual repo	ort notification)
For further information of	concerning this matter, pleas	se call:	
David Brandwein		954	764-4655
Name of	Contact Person	Area (Code & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida De	epartment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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		_	et Address

Articles of Amendment to Articles of Incorporation of

Law Offices David M. Brandwein, P.A.

(<u>Name</u>	of Corporation as curren	ntly filed with the Florida Dept. of	State)		
P97000104251					
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, th	is Florida Profit Corporation adopts	the following amendment(s) to		
A. If amending name, enter the new n	ame of the corporation:				
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	nation "Corp." "Inc." or	"Co" A professional corporation			
B. Enter new principal office address,	if applicable:	409 SE 16 Court			
(Principal office address <u>MUST BE A S</u>	STREET ADDRESS)	Fort Lauderdale, FL 33316	Fort Lauderdale, FL 33316		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		409 SE 10 Court			
		Fort Lauderdale, FL 33316			
D. If amending the registered agent at new registered agent and/or the ne Name of New Registered Agent	w registered office addre		the		
	409 SE 16 Court				
	_	street address)	22246		
New Registered Office Address:	Fort Lauderdale	, Flo			
		(City)	(Zip Code)		
New Registered Agent's Signature, if o			50 m t		
I hereby accept the appointment as regis	tered agent. I am familia	r with and accept the obligations of t	— : ; ;		
			APP NO T		
					
	Signature of New	Registered Agent, if changing	pri M		
			*		
			<u> </u>		
			Σ		

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		_	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change((Be specific)				
	-				
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	— ··· —				
lf an amendment provides for an exch	ange, reclassificati	on, or cancellat	ion of issued st	iares,	
provisions for implementing the ame	ndment if not conta	iined in the am	endment itself:		
(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)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.	r the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the an	
"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 was not required.	on and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action ar action was not required.	nd shareholder
Dated	
(By a director, president or other officer - if directors or office	
selected, by an incorporator – if in the hands of a receiver, true appointed fiduciary by that fiduciary)	stee, or other court
David Brandwein	
(Typed or printed name of person signing)	
D	
(Title of person signing)	