P99000027035

(Reques	stor's Name)	
(Addres	s)	
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(City/Sta	ate/Zip/Phone	÷#)
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Amend Ch 8 Mame Ch 8

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION:	BENJAMIN BROWN, F	P.A.
DOCUMENT NUMB	ER:	P99000027035	
The enclosed <i>Articles o</i>	f Amendment and fee a	are submitted for filing.	
Please return all corresp	ondence concerning th	is matter to the following:	
		NCENT T. BROWN	
	N	lame of Contact Person	
	THE BR	OWN LAW GROUP, PA	
		Firm/ Company	
	1195	5 NW 119th STREET	
	-	Address	
	•	MIAMI, FL 33168	
	C	ity/ State and Zip Code	
		GroupPA@gmail.com d for future annual report notification)	
For further information	concerning this matter,	please call:	
VINCEN	T T. BROWN	at (305) 6	888-7500
Name of Co	ontact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for	the following amount n	nade payable to the Florida Depar	rtment of State:
✓ \$35 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)
Mailing Address Amendment Sectorial Division of Corp. P.O. Box 6327	ction porations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	la.
Tallahassee, FL	34314	2001 Executive Center Circ	IC

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 24, 2009

VINCENT T. BROWN THE BROWN LAW GROUP, PA 1195 NW 119TH STREET 2ND MAILING MIAMI, FL 33168

SUBJECT: BENJAMIN BROWN, P.A.

Ref. Number: P99000027035

We have received your document for BENJAMIN BROWN, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved, or its certificate of authority was revoked, for failure to file its 2009 annual report in a timely manner. To reinstate the entity, you must file the reinstatement, and pay the appropriate fees, online at the Division of Corporations' website, www.sunbiz.org. Please look for Reinstatement filing in the "E-Filing Services" or "Electronic Filing" menu. There may also be a "blue box" on the Sunbiz homepage entitled "File A Reinstatement Here". You will have the option to pay by credit/debit card; or by check or money order.

The total amount due to reinstate is \$750.00.

CORPORATION MUST REINSTATE BEFORE THIS DOCUMENT CAN BE FILED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 709A00035832

Irene Albritton Regulatory Specialist II

Division of Compositions DO DOV 6997 Tellahagges Florida 99914



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2009

VINCENT T. BROWN THE BROWN LAW GROUP, PA 1195 NW 19TH STREET MIAMI, FL 33168

SUBJECT: BENJAMIN BROWN, P.A.

Ref. Number: P99000027035

We have received your document for BENJAMIN BROWN, P.A. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed entity was administratively dissolved, or its certificate of authority was revoked, for failure to file its 2009 annual report in a timely manner. To reinstate the entity, you must file the reinstatement, and pay the appropriate fees, online at the Division of Corporations' website, www.sunbiz.org. Please look for Reinstatement filing in the "E-Filing Services" or "Electronic Filing" menu. There may also be a "blue box" on the Sunbiz homepage entitled "File A Reinstatement Here". You will have the option to pay by credit/debit card; or by check or money order.

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If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 709A00035832

3:60

Articles of Amendment to Articles of Incorporation of

 BENJAMIN BR	OWN, P.A	
		_

,	. E#
(Name of Corporation as currently filed with t	the Florida Dept. of State)
P99000027035	23
(Document Number of Corporati	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Profit Corporation adopts the fol
A. If amending name, enter the new name of the corporation	<u>n:</u>
THE BROWN LAW GROU	JP, P.A. The new
name must be distinguishable and contain the word "corpo abbreviation "Corp.," "Inc.," or Co.," or the designation "Co name must contain the word "chartered," "professional associa	orp," "Inc," or "Co". A professional corporation
B. Enter new principal office address, if applicable:	1195 NW 119th STREET
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	MIAMI, FL 33168
	1195 NW 119th STREET MIAMI, FL 33168
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	
Name of New Registered Agent:	
1195	NW 119 th Street da street address) 1 Florida 33168
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am famil	

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>D</u>	CHRISTOPHER BENJAM	610 NW 183rd STREET, #202 MIAMI GARDENS, FL 33169	_ □ Add □ ☑ Remove
			_ ☐ Add _ ☐ Remove
			Add Remove
(attach ad	lditional sheets, if necessary). (Be spec	rific)	
<u>provisio</u>	nendment provides for an exchange, rens for implementing the amendment if of applicable, indicate N/A)		

	12	-73.0	$\langle G \rangle$
The date of each amendment(s) a	idoption:(date of d	on is required)	<u>• / </u>
Effective date <u>if applicable</u> :			
· (no	o more than 90 days after	mendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
by the shareholders was/were su		. The number of votes cast	for the amendment(s)
The amendment(s) was/were ap must be separately provided for			
"The number of votes cast	for the amendment(s) was	s/were sufficient for approva	11
by(vot	ting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
The amendment(s) was/were ad action was not required. The amendment(s) was/were ad action was not required.	•		
Dated 12	2-23-09		
selected,	, by an incorporator – if ir ed fiduciary by that fiduciary	officer – if directors or officent the hands of a receiver, truenty) DOWN I name of person signing)	
	(T)tle of person sign	ing) / l(e	ctor