P990000 88392

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Brooks Financial A	Advisory Group, Inc.	
DOCUMENT NUM	BER:		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Daniel L Brooks		
		Name of Contact Person	n
	Brooks Financial Advisory C	Group, Inc.	
	<u> </u>	Firm/ Company	
	6143 Astoria Drive	7 mm Company	
		Address	
	Lake Worth, FL 33463		
		City/ State and Zip Cod	e
broo	ksfinancial@comcast.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	π concerning this matter, pleas	se call:at (. 514-8803
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment 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 Section Division of Corporations P.OpBox 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

Brooks Financial Advisory Group, Inc.

Brooks Financial Advisory Group, Inc.				
(<u>Name o</u>	of Corporation as current	ly filed with the Florida Dept	t. of State)	
P99000088392				
	(Document Number of	of Corporation (if known)	·	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ac	dopts the follo	wing amendment(s) to
A. <u>If amending name, enter the new na</u> N/A	ame of the corporation:			
				The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	'Co". A professional corpora	orated" or th ution name m	e abbreviation ust contain the
B. Enter new principal office address, (Principal office address MUST BE A S		N/A .		
rincipal office address <u>most but A s</u>	TREET ADDRESS)			
C. Enter new mailing address, if appli	N/A			
				
D. If amending the registered agent an			ne of the	
new registered agent and/or the new	w registered office addres	<u>s:</u>		
Name of New Registered Agent	Daniel L Brooks			
	6143 Astoria Drive			
	(Florida st	reet address)		
New Registered Office Address:	Lake Worth		. Florida 33463	
		(City)		Zip Code)
			=	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent ered avent – Lam familiar	<u>::</u> with and accept the obligation		ว. 2 2n
	• • • • • • • • • • • • • • • • • • • •	and decept the bongum.		(アンア領域)
	1) 00	00	175	C standing
	Hul L	120		ner are
	Signature of New 1	Registered Agent, if changing	J <u>Hu</u>	
				- Eugen
				1

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:

(Altach 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	2		
X Remove	<u>V</u>	Mike Joi	<u>nes</u>		
X Add	<u>sv</u>	Sally Sm	<u>iith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change	PST		Carol M Sherr	_	6143 Astoria Drive
Add					Lake Worth, FL 33463
X Remove					
2) Change	PST		Daniel L Brooks	_	6143 Astoria Drive
X Add					Lake Worth, FL 33463
Remove					
3) Change		_		- .	
Add					
Remove					
4) Change					
Add	<u> </u>	_		••••	
Remove					
5) Change					
Add			5/7/10	_	
Remove					
6) Change		_		_	
Add					
Remove					

	rets, if necessary).				
	NA				
	•				
					
					
					
	,				
	ovides for an excha	ange, reclassification	a, or cancellation o	f issued shares,	
<u>an amendment pr</u>	<u>ementing the amen</u>	dment if not contain	ned in the amendm	ent itself:	
rovisions for impl	e maicaie ivali				
an amendment pr rovisions for impl (if not applicab					
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April 1, 2017 The date of each amendment(s) adoption:	, if other than the
date this document was signed.	, ii other than th
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 requirements, this dat document's effective date on the Department of State's records.	e will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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 stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"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.	г
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4/1/2017	
Signature Dul 2 PV	
(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)	
Daniel L Brooks	
(Typed or printed name of person signing)	
President	
(Title of person signing)	