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(((H20000405533 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : AVA FINANCIAL CONSULTANTS INC

Account Number : I20170000094

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: (954)842-1979

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COR AMND/RESTATE/CORRECT OR O/D RESIGN 1009 PETROLEUM INC

Certificate of Status	0
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COVER LETTER

TO: Amendment Section Division of Corporations

H20000 4055333

Tallahassee, FL 32303

NAME OF CORPO	RATION: 1009 PETROLEUM	M INC	
DOCUMENT NUM	(BER: P20000001327		
	s of Amendment and fee are sul	bmitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
	MOHAMMAD R. ISLAM		
		Name of Contact Person	L
	1009 PETROLEUM INC		
		Firm/ Company	
	1009 N. STATE RD 7	22	
		Address	
	ROYAL PALM BEACH, FL	. 33411	
		City/ State and Zip Code	
	AVESTA.USA@GMAIL.CO	OM.	
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas		. 460-2316
	e of Contact Person	at (Area Co	de & Daytime Telephone Number
	for the following amount made		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassec, FL 32314

Articles of Amendment

H200004055333 Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) (Document Number of Corporation (if known) (Document Number of Corporation adopts the following amendment(s) inticles of Incorporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the new name of the corporation: (I amending name, enter the name of the abbreviation "Corp.," or "Co", or "incorporation or the abbreviation "Corp.," or "Co", or "incorporation name must contain the word retered," "professional association," or the abbreviation "P.A." (I amending name, enter the name of the abbreviation "Corp.," or "Co", or "incorporation name must contain the word retered, "professional association," or the abbreviation "P.A." (I amending of professional association, or the abbreviation "P.A." (I amending of the abbreviation "Corp.," "Inc.," or "Co", or "Co", or "incorporation name must contain the word retered, "professional corporation name must contain the word retered, "P.A." (I amending name, enter the name of the abbreviation "Corp.," "Inc.," or "Co", or "incorporation "incorporation" or the abbreviation "Corp.," "Inc.," or "incorporation or "incorporation or the abbreviation "Corp.," or "incorporation or "incorporation or "incorporation" or the abbreviation "Corp.," or "incorporation or "incorporation" or "incorporation o	(Name of Corporation as curred) P20000001327 (Document Number of Incorporation: A. If amending name, enter the new name of the corporation of t	nber of Corporation (if known) is, this Florida Profit Corporation adopts the following amendments on: The new on, ""company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word "P.A."
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(Florida street address)	Name of New Registered Agent	
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The second secon	(Flore	rida street address)
New Registered Office Address: WEST PALM BEACH , Florida 33411	New Registered Office Address: WEST PALM BBAC	CH Florida 33411
New Register Confice Madress.	THEW RESIDENCE OF CONTROL STATE	
WEST PALM BEACH Nav. Pagistared Office Address: 33411	Name of New Registered Agent 8831 OKEECHOBE (Flore WEST PALM BRAC	GE BLVD #102 rida street address)
(City) (Zip Code)		

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> <u>lo</u>	hn Doe	
X Remove	<u>v</u> <u>m</u>	like Jones	
X Add	<u>SV</u> <u>S</u> e	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PDTS	MOHAMMAD R. ISLAM	8831 OKEECHOBEE BLVD #102
Add			WEST PALM BEACH, FL 33411
Remove			
2) Change	VPDT	MOHAMMAD M. RAHMAN	5401 NW 95TH AVE
Add			SUNRISE, FL 33351
X Remove 3) Change	VPD\$	MD M. HOSSAÏN	9467 NW 52ND MANOR
Add			SUNRISE, FL 33351
X Remove			
4) Change			
Add			
Remove			
5) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
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	NOVEMBER 24, 2020	
The date of each amendment(s) a		er than th
date this document was signed.	H2000040x 5333	1
Effective date <u>if applicable</u> :		J/
	(no more than 90 days after amendment file date)	गुरु
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be li epartment of State's records.	isted as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder action and sharehold	der
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
· , —————	(voting group)	
11/24/202	٥	
Dated	·	
Signature	hat Telan	
	irector, president or other officer - if directors or officers have not been	
, · ·	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
арроіл	ted fiduciary by that fiduciary)	
	MOHAMMAD R. ISLAM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u>_</u>