# P21000058626

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PICK-UP WAIT	MAIL
(Business Entity Name)	<u> </u>
(Document Number)	
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R. WH. \*\*\* SEP 0.1 ....

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SHABTALINVES	STMENTS INCORPORATI	ED
DOCUMENT NUMI	BER:P21000058626		
	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Raphael Shabtai		
		Name of Contact Person	<u> </u>
	_	Firm/ Company	<u> </u>
	5501 N NOB HILL RD		
	SUNRISE, FL 33351	Address	
		City/ State and Zip Code	<u> </u>
	raphael@tdweloseouts.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Raphael Shabtai		954 at (	746-8000 ) le & Daytime Telephone Number
Name o	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street Suite 810

Tallahassee, FL 32303

## Articles of Amendment

Arti	to cles of Incorporatio	n		
A.C.	of		01	
Shadai Investments	Toc.	·	- ´ '2:	: '
(Name of Corporation as	s currently filed wit	h the F <u>lor</u> id	a Dept. of State)	
P21000058626				
(Document	Number of Corporat	ion (if knowi	ıi	
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	tutes, this <i>Florida Pr</i>	ofit Corpora	ttion adopts the fe	ollowing amendment(s
A. If amending name, enter the new name of the corpor	ration:			
				The new
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviati	"Co". A professio	or "incorpo, mal-corpora	rated" or the abb tion_name_must	reviation "Corp" contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u> )				
D. If amending the registered agent and/or registered of new registered agent and/or the new registered offic		rida, enter t	he name of the	
Name of New Registered Agent				
	Florida street address)	)		
New Registered Office Address:	(City)		, Florida	(Zip Code)
New Registered Agent's Signature, if changing Register	red Agent:			

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

_	· ##	
IJ	If amending the Officers'and/or Directors, enter the title and name of each officer/director being removed and title, n	ame, and
a	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>Joh</u> i	n Doe	
X Remove	<u>V</u> <u>Mik</u>	te Jones	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	Dalia Shabtai	5501 N NOB HILL RD
X Add			SUNRISE, FL 33351
Remove			
2) Change	S and T	Chanel Shabtai	5501 N NOB HILL RD
X Add			SUNRISE, FL 33351
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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· ·		
	If amonding or adding additional Articles, onter change(s) here.	
, r	If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
	(Attach auathoria sneeds, if necessary). The specific)	
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E	1. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
•	provisions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate N/A)	
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The date of each amendment(s) adoption:
68/12/2021  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 date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval
by
Signature  (By a firector, 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)  Raphael Shabtai  (Typed or printed name of person signing)  Incorporator  In 15