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(Re	equestor's Name)	
(Ad	dress)	
hA)	(dress)	
(*	,	
(Cit	ty/State/Zip/Phone	? #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations	
A.	A
NAME OF CORPORATION: 45	Kew Corporation
DOCUMENT NUMBER: P202	0000 97712
The enclosed Articles of Amendment and	fee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Samis	Shia ASKUD Name of Contact Person
HSKei	U COPPORATION Firm/Company
1968-	500 Providence PI
Port S	Lucie PC 34953
Ochou	City/ State and Zip Code
E-mail address	s: (to be used for future annual report notification)
For further information concerning this m	atter, please call:
Samishia toke	w at 186 399-2985
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filin Certificate o	o grant grant migrou
Mailing Address Amendment Section	Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Articles of Incorporation

of
Asken (proporation
(Name of Corporation as currently filed with the Florida Dept. of State)
$T_{2}\Omega\Omega\Omega\Omega\Omega977/2$
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Robert Brown III
1968 515 Hoxidence Pl
New Registered Office Address: Part Soint Lucie, Florida 34953 (City) Florida 34953
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
N =
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.

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>John Doe</u>	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	P Robert Brown	III 1968 500 Providence PI
X Add		Part Stilucie FL
Remove	V N I I ON	34953
2) Change	V Herberts. Jolk	1515 NW 114h Pl
X Add	Λ	Fort Louderdale
Remove 3)Change	CEO Samishia Ask	1W FZ 33311
X Add		1968 Sw Providence PI
Remove		Host St. Lucie FC 3495
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		-,
Remove		

If amonding on adding a little 1.4.	Salaa a sa d	/ > 1		•	
<u>If amending or adding additional Arti</u> (Attach additional sheets, if necessary).	(cles, enter change	(s) here:			
(recall teleditional sneets, if necessary),	the specific)				
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If an amendment provides for an exch	ange, reclassificat	ion, or cancella	ition of issued s	shares,	
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not cont	ained in the ar	nendment itself	<u>f:</u>	
(g not approxime, material (n/A)					
			_	 ·	
			.		
					

The date of each amendment(s) ac date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days o	ster amendment file date)
Note: If the date inserted in this bl document's effective date on the De		tutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of	directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number flicient for approval.	er of votes cast for the amendment(s)
	roved by the shareholders through vo each voting group entitled to vote sep	ting groups. The following statement parately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were suffic	cient for approval
by	(voting group)	· · · · · · · · · · · · · · · · · · ·
selected	rector, president or other officer – if it, by an incorporator – if in the hands ed fiduciary by that fiduciary) Repert Brown (Typed or printed name of Registered Agent)	of a receiver, trustee, or other court