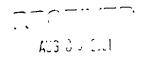
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Subway 4144, Inc, c/o Makvin Sager DOCUMENT NUMBER: K28584 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Wahid Ghaniwala Name of Contact Person Firm/ Company 13036 NW 14th Street Address Pembroke Pines, FL 33028 City/ State and Zip Code wghaniwala@msn.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 895 - 3999

Area Code & Daytime Telephone Number Wahid Ghaniwala Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$43.75 Filing Fee & ☐\$52.50 Filing Fee S35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Subway 4144, Inc. c/o Makvin Sager (Name of Corporation as currently filed with the	Florida Dent. of State)
· · · · · · · · · · · · · · · · · · ·	Torica Department
K28584	1
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Co</i> its Articles of Incorporation:	prporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Subway 4144. Inc	The new
name must be distinguishable and contain the word "corporation," "company," or "ir "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional c "chartered," "professional association," or the abbreviation "P.A."	corporated" or the abbreviation "Corp" orporation name must contain the word
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
	0 13
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
muning dearest interest in the second	36
-	
D. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address: Name of New Registered Agent	enter the name of the
(Florida street address)	
	Elosida
New Registered Office Address: (City)	Florida
· *	
New Registered Agent's Signature, if changing Registered Agent:	

Signature of New Registered Agent, if changing

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Art	(Ra enacitia)				
Attach additional sheets, if necessary).	(pe specific)				
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		<u> </u>	<u>.</u>		
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If an amendment provides for an exc	hange, reclassific	ation, or cancell	ation of issued s	hares,	
provisions for implementing the am (if not applicable, indicate N/A)	endment if not co	<u>ntained in the a</u>	mendment itself	<u>:</u>	
(if not applicable, indicate N/A)					
A					
	-				
					
					
			<u> </u>		

• • • • • • • • • • • • • • • • • • • •	
The date of each amendment(s) addate this document was signed.	doption:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this b document's effective date on the Do	lock does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
☐ The amendment(s) was/were app must be separately provided for	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 cast	for the amendment(s) was/were sufficient for approval
bv	(voting group)
,	(voting group)
Dated	10 10
Signature	W-12 4
(By a d	irector, president or other officer - if directors or officers have not been
	d, by an incorporator - if in the hands of a receiver, trustee, or other court
appoin	ted fiduciary by that fiduciary)
	Wahid Ghaniwala
	(Typed or printed name of person signing)
	President