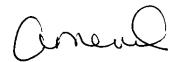
## N0600000105H

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ADR 6/9/09

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION: Sharia Acader	ny, LLC	
DOCUMENT NI	JMBER: N0600001054		
The enclosed Arti	cles of Amendment and fee are sub	mitted for filing.	
Please return all c	orrespondence concerning this matt	er to the following:	
<u></u>	<del></del>	e Kadoura	
	(Name of	Contact Person)	
	Kadour	a & Co., LLC	· 
	(Firm	Company)	- <del></del>
	P.O. I	3ox 66758	
	(A	ddress)	
	St. Pete Bea	ch, Florida 33736	
	(City/ State	e and Zip Code)	
	Brucekad E-mail address: (to be used	@hotmail.com for future annual report notifi	cation)
For further inform	ation concerning this matter, please	call:	
Bruce Kadoura		at ( 727 <sub>)</sub> 547-73	72
(Na	me of Contact Person)	at ( 727 ) 547-73 (Area Code & Dayt	ime Telephone Number)
Enclosed is a chec	k for the following amount made pa	yable to the Florida Departme	nt 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)
Aı Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 Ilahassee, FL 32314	Street Address Amendment Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	er Circle

## **Articles of Amendment** to f Inc

FILED

	ticles of incorporation		
V 1	of	2009 JUN -5	AM
Sharia	a Academy of Ame	rica, Inc.	W 11: 13
(Name of Corporation as cu	rrently filed with the Flo	rida DAPL OLSTAL	OF STATE
			E. FLORIDA
	6000001054		<del></del>
(Document N	umber of Corporation (if	known)	
ursuant to the provisions of section 617.100 ne following amendment(s) to its Articles of		lorida Not For Profi	it Corporation a
A. If amending name, enter the new name	of the corporation:		
The new name must be distinguishable and abbreviation "Corp." or "Inc." <b>"Company"</b>			orated" or the
s. Enter new principal office address, if a Principal office address <u>MUST BE A STRE</u>			<u></u>
Enter new mailing address, if applicab			
(Mailing address <u>MAY BE A POST OF I</u>	·ICE BOX)	<u>-</u>	
	<del></del>		
		. 51	
Name of New Registered Agent:		ss in Florida, enter (	<u>ne name of the</u>
new registered agent and/or the new re-			ne name of the
<u>Name of New Registered Agent</u> :	gistered office address:	et address)	<u>fie name of the</u>
<u>Name of New Registered Agent</u> :	gistered office address:	et address), I	

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)

Name ' ' Title Address Type of Action Hatem Elhagaly Sec 2534 Central Avenue NE ☐ Add ☑ Remove Minneapolis, MN 55418 Haitham Barazanji Trea P.O. Box 94 \_\_\_ 🗹 Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: May 25, 2009				
Effective date if applicable:	May 25, 2009			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(CHECK ONE)			
✓ The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.			
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.			
Dated_June Signature_\ (By ha	the chairman or vice chairman of the board, president or other officer-if directors on the been selected, by an incorporator – if in the hands of a receiver, trustee, or			
oth	er court appointed fiduciary by that fiduciary)			
	Haitham Barazanji			
	(Typed or printed name of person signing)			
	Treasurer			
	(Title of person signing)			

Page 3 of 3