

N110000009025

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

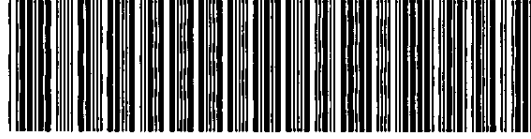
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/02/14--01009--018 **43.75

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2014 DEC 30 PM 3:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OR
12/30/14

**00789, 00531, 00671*



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2014

Khalil Ahmed Khan
Dawat-E-Islami, Inc.
19244 N.W. 65 Ct.
Hialeah, FL 33015

SUBJECT: DAWAT-E-ISLAMI, INC.
Ref. Number: N11000009025

We have received your document for DAWAT-E-ISLAMI, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Bylaws are not filed with this office. Please retain them for your records.

Please delete the reference to the by-laws and resolution on page 3 section E on the amendment form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
Regulatory Specialist II

Letter Number: 514A00026022

DAWATE-E-ISLAMI, Inc.
14219 SW 42nd Street
Miami FL, 33175

Re: Doc # N11000009025

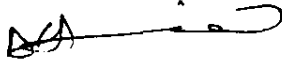
To whom it may concern:

Attached please find the documents for above mentioned corporation.

1. Articles of Amendment to Articles of incorporation.
 - a. Change in registered agent
 - b. Adding/deleting of Officers
2. Resolutions from The board of Directors
3. Bylaws

Thank you

Abdul G. Ahmad
Vice President



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DAWAT-E-ISLAMI, INC.

DOCUMENT NUMBER: N11000009025

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KHALIL AHMED KHAN

(Name of Contact Person)

DAWAT-E-ISLAMI, INC.

(Firm/ Company)

19244 NW. 65 CT

(Address)

HIALEAH FL. 33015

(City/ State and Zip Code)

Dr.maqch@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KHALIL AHMED KHAN at (786) 586 5728
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|--|--|--|--|

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

DAWAT-E-ISLAMI, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

N11000009025

(Document Number of Corporation (if known))

FILED.

2014 DEC 30 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

NOT APPLICABLE

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

N/A

*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

19244 NW. 65 CT

HIALEAH FL.33015

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:

KHALIL AHMED KHAN

19244 NW 65 CT.HIALEAH FL.33015

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida N/A

(Zip Code)

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.


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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>SAGHIR UL HASSAN</u>	<u>14219 SW.42nd STREET</u> <u>MIAMI</u> <u>FL. 33175</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>MUHAMMAD AFTKHAR</u>	<u>1901 LAMONT DRIVE</u> <u>GARLAND</u> <u>TX.75040</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>ASVAD NAVIWALA</u>	<u>6500 SANDS POINT ROAD</u> <u>APT.# 605</u> <u>HOUSTON TX. 77074</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>FAIZAN AHMED KHAN</u>	<u>6821 N. WESTERN AVE</u> <u>CHICAGO</u> <u>IL. 60645</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>MAHMOOD AHMAD</u>	<u>127-02, 97 AVENUE</u> <u>S.RICHMOND HILL</u> <u>NY.11419</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u> <u> </u>

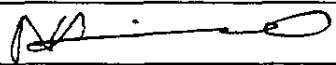
The date of each amendment(s) adoption: 11/20/2014

Effective date if applicable: 11/20/2014
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated NOVEMBER 19, 2014

Signature 

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ABDUL G. AHMAD
(Typed or printed name of person signing)

VICE PRESIDENT
(Title of person signing)