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| PICK-UP | MAIT | MAIL |
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SECRETARY OF STATE
AREA SECRETARY OF STATE

MAY 14 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: Sudanese Community Association of South florid | 4 |
|--|---|
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Ahmed TalaaT (Name of Contact Person) | |
| (Name of Contact Person) | |
| (Firm/ Company) | |
| a superior of | |
| 12390 NW 26 th ct- (Address) | |
| Coral gprings, FL 33065 (City/ State and Zip Code) | |
| (City/ State and Zip Code) | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Ahmed TalaaT at (954) 254-9620 (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: | |
| \$35 Filing Fee \$\begin{array}{c} \$\sum \$\$43.75 Filing Fee & \$\begin{array}{c} \$\$Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & Certified Cop | |
| Mailing Address Amendment Section Street Address Amendment Section | |
| Division of Corporations Division of Corporations | |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| Sudanese Community Assoc | iation of South Flo | onda inc | |
|---|--|---|--|
| (Name of Corporation as currently filed with the Flo | orida Dept. of State) | | |
| N 120000013 | 06 | | |
| (Document Number of Co | | | |
| Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporate Sudayese American As name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | ion: 12390 NW 26th Ct | h florida The new viation "Corpo or "Ina" | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 12390 NW 26th CH Coral springs, FL | | |
| D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office a | | e of the | |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | (Florida street address) | | |
| | , Florida _ | | |
| (City) | | (Zip Code) | |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair | miliar with and accept the obligations | of the position. | |
| Signature of New | Registered Agent, if changing | | |

Page 1 of 4

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 <math>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 X Remove X Add | <u>V</u> <u>Mi</u> | nn Doe ike Jones Ily Smith | |
|-----------------------------------|--------------------|----------------------------------|---------------------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | | 4 |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | |

| If amending or adding additional Art (attach additional sheets, if necessary). | (Be specific) | |
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| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|---|--------------------------------------|
| uate ans document was signed. | |
| Effective date <u>if applicable</u> : (no more than 90 days after an | nendment file date) |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the members and the number was/were sufficient for approval. | r of votes cast for the amendment(s) |
| ☐ There are no members or members entitled to vote on the amendmen adopted by the board of directors. | t(s). The amendment(s) was/were |
| Dated 4/29/15 Signature Ahmestfalant | |
| Signature Amnestalant | |
| (By the chairman or vice chairman of the board, pro- | |
| have not been selected, by an incorporator – if in other court appointed fiduciary by that fiduciary) | the nands of a receiver, trustee, or |
| Ahmed Talaat | |
| (Typed or printed name of person sig | ning) |
| President | |
| (Title of person signing) | |