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Amend Manus

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Nazif Osl	mani Found	ation, INC
DOCUMENT NUMBER: N1400006	6163	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Nazif Osmani		
	(Name of Contact Perso	n)
Nazif Osmani Foundatio	n, INC	
	(Firm/ Company)	
750 Briarcreek rd		
	(Address)	
Jacksonville, Fl 32225		
	(City/ State and Zip Cod	e) ·
Osmani.Nazif@g		
E-mail address: (to be use	•	notification)
For further information concerning this matter, please	e call:	
Nazif Osmani	_{at (} 904	874-4031
(Name of Contact Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of



Nazif Osmani Foundation	n, INC		· //
(Name of Corporation as currently	·	orida Dept. of State)	
N14000006163			
(Docu	ment Number of C	orporation (if known)	
Pursuant to the provisions of section 617.1 amendment(s) to its Articles of Incorporati	006, Florida Statute on:	es, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new nar	ne of the corporat	ion:	
Osmani Foundation, INC			The new
		tion" or "incorporated" or the abbreviatio	
"Company" or "Co." may not be used in		N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES			
		<u> </u>	
C. Enter new mailing address, if applic	a hle•	N1/A	
(Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent and new registered agent and/or the new		<u>ce address in Florida, enter the name of t</u> address:	<u>he</u>
Name of New Registered Agent:	N/A		
Name of New Registered Agent.			
	· · ·	(Florida street address)	
New Registered Office Address:			
	N/A	, Florida	<u> </u>
	(Ciţv)		(Zip Code)
New Registered Agent's Signature, if ch			*.*
i nereoy accept the appointment as registe.	rea agent. I am fa	miliar with and accept the obligations of th	е роѕиюп.
	Signature of New	Registered Agent, if changing	
	Signature by new	resoluted rigetil, y 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 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.

X Change X Remove X Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>s</u>	Morsal Osmani	750 Briarcreek rd
Add			Jacksonville, Fl
X Remove			32225
2) Change	TRD	Alborz Roshanger	750 Briarcreek rd
X Add			Jacksonville, FI
Remove			32225
3) Change	D	Sharif Osmani	750 Briarcreek rd
Add			Jacksonville, FI
X Remove			32225
4) Change	TRS	Haris Aman	750 Briarcreek rd
X			Jacksonville, FI
Remove			32225
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	<u></u> .		
	•			
N/A				
				-
		·		
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	e date of each amendmen		, if other than the	
date this document was signed. Effective date if applicable: N/A				
		(no more than 90 days after amendment file date)		
Ade	option of Amendment(s)	(CHECK ONE)		
	The amendment(s) was/w was/were sufficient for ap	vere adopted by the members and the number of votes east for the amendment(s) oproval.		
	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 09/	10/2014		
	Signature?	Joz. Co.		
	have r	e chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)		
	Nazif C	Dsmani		
	· · · · · · · · · · · · · · · · · · ·	(Typed or printed name of person signing)		
	Preside	ent & Director		
		(Title of person signing)		