

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: NAAS WELFARE FOUNDATION, INC.

DOCUMENT NUMBER: N15000008852

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

Please return all correspondence concerning this matter to the following:

TAYYAB AHMAD QASMI

(Name of Contact Person)

(Firm/ Company)

12724 RAFTSMEN COURT

(Address)

ORLANDO, FL 32828

(City/ State and Zip Code)

TAYYAB1996@YAHOO.COM

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

For further information concerning this matter, please call:

TAYYAB QASMI

(Name of Contact Person)

at

407 437-8131

(Area Code) (Daytime Telephone Number)

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

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input 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

FILED

16 AUG 31 AM 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAAS WELFARE FOUNDATION, INC

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

N1500008852

(Document Number of Corporation (if known))

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:

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:

(Principal office address MUST BE A STREET ADDRESS)

12724 RAFTSMEN COURT

ORLANDO, FL 32828

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

12724 RAFTSMEN COURT

ORLANDO, FL 32828

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:

TAYYAB QASMI

12724 RAFTSMEN COURT

(Florida street address)

New Registered Office Address:

ORLANDO

(City)

Florida 32828

(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

(Attach additional sheets, if necessary)

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Title</u>	<u>Name</u>
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Address

1) <u>Change</u>	<u>DIR</u>	<u>MOHAMMAD A. SIDDIQUI</u>	<u>8212 GEMSTONE COURT</u>
<u>Add</u>			<u>ORLANDO, FL 32836</u>
<u>X</u>			
<u>Remove</u>			

2) <u>Change</u>	<u>DIR</u>	<u>TAYYAB A. QASMI</u>	<u>12724 RAFTSMEN COURT</u>
<u>X</u> Add			<u>ORLANDO, FL 32828</u>
<u>Remove</u>			

3.) Change _____

Add _____

Remove _____

4) ☐ Change _____

☐ Add _____

☐ Remove _____

5) _____ Change _____
 _____ Add _____
 _____ Remove _____

6) _____ Change _____
 _____ Add _____
 _____ Remove _____

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

AMENDING ORIGINAL ARTICLE #3 TO ALSO INCLUDE THE FOLLOWING:

"TO PROVIDE ASSISTANCE FOR POVERTY ALLEVIATION, EDUCATION, AND LOW-COST
AND CHARITABLE HEALTHCARE IN THE UNITED STATES AND THE COUNTRY OF INDIA.

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

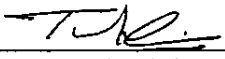
Effective date if applicable: AUGUST 29, 2016
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

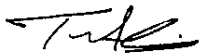
Adoption of Amendment(s) (CHECK ONE)

- ☐ 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 AUGUST 29, 2016

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)

TAYYAB AHMAD QASMI
(Typed or printed name of person signing)


(Title of person signing)