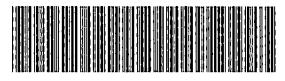
N1800000 2532

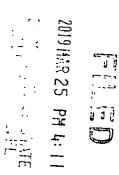
(Re	equestor's Name)				
(Ac	ddress)				
(Ac	ddress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
		}			
		{			

Office Use Only



900325123129

Ŭ3/04/13+-01042++026 ★★35.00



R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations AR-RAYYAN INSTITUTE INC NAME OF CORPORATION: N18000002532 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ALTAF SATTAR (Name of Contact Person) SOFTBOOKS INC (Firm/ Company) 5373 N NOB HILL ROAD (Address) SUNRISE, FL 33351 (City/ State and Zip Code) INFO@SOFTBOOKSINC.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALTAF SATTAR 954-874-6230 (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 ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301



March 13, 2019

ALTAF SATTAR 5373 N NOB HILL RD SUNRISE, FL 33351

SUBJECT: AR-RAYYAN INSTITUTE INC

Ref. Number: N18000002532

We have received your document for AR-RAYYAN INSTITUTE INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

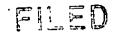
Rebekah White Regulatory Specialist III

Letter Number: 319A00005046

www.sunbiz.org

" appropriate box is Checkeel

Articles of Amendment to Articles of Incorporation of



AR-RAYYAN INSTITUTE INC

2019 MAR 25 PM 4: 11

AR-KATTAN INSTITUTE INC		MIDHW CO III 4. 1.
(Name of Corporation as c	urrently filed with the F	lorida Dept. of State) - 3 - 15 - 57 -
N18000002532		TALL SEEFE
(Document	Number of Corporation (i	f known)
Pursuant to the provisions of section 617,1006, Florida Samendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	<u>poration:</u>	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	rporation" or "incorpora	ted" or the abbreviation "Corp," or "Inc,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	RESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<i></i>	
 If amending the registered agent and/or registere new registered agent and/or the new registered o 		la, enter the name of the
new registered agent and on the new registered o	HIV HUGUESS	
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		тогна хуге авием
		, Florida
 -	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	
I hereby accept the appointment as registered agent. 1		pt the obligations of the position.
	Signature of New Res	sistered 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; FR = 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, Freasurer, 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add			
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) ARTICLE III		
COMMUNITY A PLACE FOR LEARNING AND PROMOTE UNDERSTANDING AND COOPERATION AMONG		
PEOPLE OF FAITH, NON=PROFIT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986		

The date of each amendment(s) ado late this document was signed.	option:	, if other than the
iffective date if applicable:		
	(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this blocoment's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this dapartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad- was/were sufficient for approval	opted by the members and the number of votes cast for the amendment.	ent(s)
There are no members or membadopted by the board of directo	ers entitled to vote on the amendment(s). The amendment(s) was was	ere
Dated $\frac{2}{2}$	5/19	
Signature	TO 1/2	
have not bee	man or vice cliar hardof the board president or other officer-if direct on selected, by an incorporator – if in the hands of a receiver, trustee, appointed fiduciary by that fiduciary)	
MUZ	(Typed or printed name of person signing)	·
	PRESIDE AT (Title of person signing)	