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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : KAYALI & CO., P.A. Account Number : I20160000100

Phone : (813)899-9642 Fax Number : (813)899-9793

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email 1	Address:			
	MUUI ESS.			

COR AMND/RESTATE/CORRECT OR O/D RESIGN HELP YATEEM USA, INC.

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO: Amendment Section Division of Corporation	s	,				
NAME OF CORPORATIO	HELP YATEEM US					
DOCUMENT NUMBER:	J20000011247				·	
The enclosed Articles of Am	endment and fee are subr	nitted for filing.				
Please return all corresponde	nce concerning this matte	er to the following:				
AHMED YOUSSEF						
		(Name of Contact Pe	erson)			
Pathway To Philanthropy I	-LC	,				•
		(Firm/ Company	<i>'</i>)			
20102 Natures Hike Way						•
		(Address)				
Tampa, FL 33647					-	<u> </u>
	······································	(City/ State and Zip	Code)	•	F-1	
ayoussef.p2p@gamil.com						
E	-mail address: (to be used	for future annual rep	ort notificatio	n)		
For further information conc	erning this matter, please	call:				
Ahmed Youssef		at	(646)	291-7472		
(Name of Contact Person			(Daytime Te	lephone N	Tumber)
Enclosed is a check for the fo	ollowing amount made pa	ayable to the Florida l	Department of	State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certif s Certif	O Filing Fee icate of Status ied Copy tional Copy is osed)		

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

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

HELP YATEEM USA, INC.				
(Name of Corporation as currently filed with th	e Florida i	Dept. of State)		
N20000011247				
(Docur	nent Numb	per of Corporation (if known)		
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	,		oration adopts th	e following
A. If amending name, enter the new name of th	e corpora	tion:		
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name	d "corpora	ition" or "incorporated" or the abbr	eviation "Corp."	The new or "Inc."
B. Enter new principal office address, if applica	able:	12603 THONOTOSASSA RD		
(Principal office address MUST BE A STREET)	<u> </u>	
	•	THONOTOSASSA, FL 33592		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	<u>BOX</u>)	12603 THONOTOSASSA RD		- :
		THONOTOSASSA, FL 33592		<u> </u>
				•
D. If amending the registered agent and/or registered agent and/or the new registered	istered offi	ice address in Florida, enter the na	me of the	<u> </u>
•		YOUSSEF	$r \cdot i$,
	20102 NATURES HIKE WAY			
Now Paristrand Office Address		(Florida şîreel addr	¥55)	
<u>New Registered Office Address:</u> TAMPA		, Florida 33647		
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	nt. I am fa	miliar with and accept the obligation	ns of the position.	

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: X Change X Remove X Add	PT John F V Mike SV Sally	<u>Iones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add	<u>D, S</u>	YOUSSEF KROMAH	5411 SPRINGFIELD AVENUE
Remove			PHILADELPHIA, PA 19143
2) X Change Add	<u>D, T</u>	NADIM AYUB MODI	3717 WEST PARIWINKLE DR
Remove Change Add Remove	<u>D</u>	ABDULGHANI AMIN HASSAN	SOUTH JORDAN, UT 84095 ST LAKES BUSINESS CENTRE STE 7, 85 TARLING ROAD LONDON, E16, 1HN GB
4) Change	D	SADDIQ IBN YOUSEF LEWIS	6801 MUSCADINE LANE
Remove			PLANT CITY, FL 33565
5) Change Add			
Remove			
6) Change Add			
Remove			-
E. If amending or additional she		ticles, enter change(s) here: (Be specific)	
ARTICLE VII - DISSO	LUTION	·	· · · · · · · · · · · · · · · · · · ·
Upon the dissolution o	of this organizatio	n, assets shall be distributed for one or	more exempt purpose within the me
section 501(C) (3) of the	he Internal Reve	nue Code, or corresponding section of a	ny future federal tax code, or shall t
distributed to the feder	ral government, o	or to a state or local government, for a pr	ublic purpose.

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The date of each amendment(s) adopted date this document was signed.	on:		, if other than the
Effective date if applicable:			
Priecuve date it applicante:	(no more than 90 days after amendment file date)		
	oes not meet the applicable statutory filing requirem		ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for	the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

OCTOBER 2, 2024

Dated

Signature

(By the chairman review 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)

(Typed or printed name of person signing)

(Title of person signing

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