N21000010275

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SECRETARY OF STATE PALLAHASSEE, FLORIDA

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SEP 2 3 2021 S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

Elite Zone NAME OF CORPORATION:	
N21000010275	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Reginya Greene	
	(Name of Contact Person)
Elite Zone	
	(Firm/ Company)
PO Box 904	
	(Address)
Lithia FL 33547	
	(City/ State and Zip Code)
info@feffl.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter	, please call:
Reginya Greene	813 3266812 at
(Name of Contact	······································
Enclosed is a check for the following amount	made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	
Mailing Address	Street Address

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

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

FILEU

Articles of Amendment to Articles of Incorporation

Elite Zone		₹ s. 2
Name of Corporation as currently filed with the Fl	orida Dept. of State)	
N21000010275		AHE A
(Document	Number of Corporation (if kn	111
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the co	Statutes, this Florida Not For	Profit Corporation adopts the following
A. If amending name, enter the new name of the co	rporation:	ATE
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	orporation" or "incorporated	The nev " or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u>X</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Flo	rida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: l am familiar with and accept t	he obligations of the position.
	Signature of New Registe	red 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; 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 Doc 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>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add	<u>S</u>	Florida Elite Flag Footba	Natrico FL 33594
 × Remove 2) Change × Add 	CEOS	Reginya Greene	308 Morning Rain Place Valrico FL 33594
Remove 3) Remove			PO Box 904 Lithia FL 33547
4) Change Add			
Remove 5) Change Add Remove		<u> </u>	
6) Change Add			
E. If amending or addin (attach additional shee	g additio	nal Articles, enter change(s) here issary). (Be specific)	:

The date of each amendment date this document was signed	t(s) adoption: September 1, 2021	, if other than th
	<u> </u>	
	<u> </u>	

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.

ἁ	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 <u>Sept 7, 2021</u>					
	Signature Bolel Artel Rober					
	(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)					
	Bilial Abdul Rahman					
	(Typed or printed name of person signing)					
	VPT					
	(Title of person signing)					

FILED
2021 SEP 10 PM 6: 00
SECRETARY OF STATE