N9600004688

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COVER LETTER

TO: Amendment Section

Division of Corporations

American Muslim Welfare Organization of So. Fla., Inc.

DOCUMENT NUMBER: _

N96000004688

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

Please return all correspondence concerning this matter to the following:

Syed Iqbal Hussain

(Name of Contact Person)

American Muslim Welfare Organization of So. Fla., Inc.

(Firm/ Company)

P.O.Box 11984 Ft. Lauderdale

(Address)

Ft. Lauderdale, FL 33339

(City/ State and Zip Code)

miqbal1786@gmail.com

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

For further information concerning this matter, please call:

Tallahassee, FL 32314

Mohammed Iqbal		954	588-6395
		at	
	(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 & 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 A	<u>ddress</u>	Street	Address
Amendmei	ut Section	Amend	Iment Section
Division of Corporations		Divisio	on of Corporations
P.O. Box 6327		Clifton	Building

2661 Executive Center Circle Tallahassee, FL 32301



Articles of Amendment to Articles of Incorporation of

American Muslim Welfare Organization of So. Fla., Inc.

(<u>Name</u>)	of Corporation as currently filed with the Florida Dept. of State)
Amendment dated 10/22/2018	N960000 4688
	(Document Number of Corporation (if known)
Pursuant to the provisions of section amendment(s) to its Articles of Inco	a 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following protation:
A. If amending name, enter the n	ew name of the corporation:
	The new
name must be distinguishable and c "Company" or "Co." may not be u	ontain the word "corporation" or "incorporated" or the abbreviation "Corp " or "Inc." - sed in the name.

B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)

	F
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u>)	
· · · ·	
	9.

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:

New Registered Office Address:

(Florida street address)

_, Florida ____ (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

Page 1 of 4

(City)

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>V</u> <u>Mik</u>	n Doe te Jones y Smith	
<u>Type of Action</u> (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Haq, Saleem A, Dr.	8130 NW 47th Drive
Add			Coral Springs
X Remove			FL 33067
2) Change	Т	Siddiqui. Mohammad A	12340Tifton Ct.
Add			Boca Raton
X Remove			FL, 33428
3) Change	S	Illyas, Mohammad Dr.	4413 Woodfield Drive
Add			Boca Raton
X Remove			FL 33434
4) Change	ВМ	Pirzada. Nelofour	9795 NW 48th Drive
Add			Coral Springs
X Remove			FL 33076
51 Change	BM	Haroon, Anwar	9795 48th Drive
Add			Coral Springs
X Remove			FL 33076
6) X Change	T	Iqbal. Mohammed	8200 NW 40th Court
Add			Coral Springs
Remove			FL 33065
		Page 2 of 4	

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

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

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Page 3 of 4

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The date of each amendment	s) adoption:	if other than the
date this document was signed.		
	10/22/2018	
Effective date <u>if applicable</u> :		

(no more than 90 days after amendment file date)

<u>Note:</u> 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) (Q

(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.

10/22/2018 Dated
Signature
(By the chairman or vice chairman of the board, president or other officer-if directors
whave not been selected, by an incorporator – if in the hands of a receiver, trustee, or
other court appointed fiduciary by that fiduciary)
Syed Iqbal Hussain

(Typed or printed name of person signing)

Chairman

(Title of person signing)