# P000000012996

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DIVISION OF CORPORATION

Amend CC 10 1/3/12

#### **COVER LETTER**

TO: Amendment Section

Division of Corpor	rations				
NAME OF CORPOR	<sub>ATION:</sub> Muna & Mo	na, Inc.			
DOCUMENT NUMB	ER: P0000007299	6			
	f Amendment and fee are sub				
	•	ŭ			
Please return all corresp	oondence concerning this mat	ter to the following:			
	N	luhanned Farra	j		
<del>-</del>		Name of Contact Person			
_	Muna & Mona, Inc.				
	Firm/ Company				
_	3200 W. Broward Blvd.				
	Address Fort Lauderdale, FL 33312				
-		City/ State and Zip Cod			
N	WOLFSON@WC	N ESONASSOC	CIATES COM		
		ed for future annual report			
For further information	concerning this matter, please	e call:			
Muhanned Fa	іггај	<sub>at (</sub> 954	, 815-7116		
Name of	Name of Contact Person Area Code & Daytime Telephone Num		de & 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)		
Amer Divis P.O. 1	ng Address Idment Section Idment Sec	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		



#### Articles of Amendment to Articles of Incorporation of

### Muna & Mona Inc.

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

nt(s) to

	P000000729	996		
(Docume	nt Number of Corporation (if kr	nown)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Flo	rida Profit Corporation a	idopts the following	g amendme
A. If amending name, enter the new n	ame of the corporation:			
				_The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	". A professional corpor	orated" or the a ration name must	bbreviation contain the
B. Enter new principal office address,				_
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )			
	•			_
				-
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
(Matting datess MAT BE A FUST	<u>OFFICE BUX</u>	<del></del>		-
	-			-
			<del></del>	=
D. If amending the registered agent ar	nd/or registered office address	in Florida, enter the na	me of the	
new registered agent and/or the ne		•		
Name of New Registered Agent	Muhanned Farraj			
,	3200 W. Broward	Blvd.	<b>-</b>	
	(Florida street	address)	_	•
New Registered Office Address:	Fort Lauderdale	Florida	<sub>3</sub> 33312	
	(City)	,, , , , , , , , , , , , , , , ,	(Zip Code)	_
		•		
New Registered Agent's Signature, if of I hereby accept the appointment as regis		h and accept the obligatio	ns of the position.	
M	h / Jan	V	J p	
	Million Colon Provinced Association	)	-	

Signature of New Registered Agent, if changing

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on of issued shares, ndment itself: d's shares. Shall be
nd 50% to Abdel H Farra
<del></del>
<u> </u>
<u>:</u>
,

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change Add Remove	VP	ABDEL H FARRAJ	401 NW 27TH AVENUE POMPANO BEACH, FL 33069
2) Change Add Remove	РТ	MUHANNED FARRAJ	3200 W. BROWARD BLVD. FORT LAUDERDALE, FL 33312
3) Change Add Remove		·	
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove		·	

The date of each amendment(s) adoption:	6-5-12			
Effective date if applicable:	<b>1</b>			
	date being	nent file date)		
	mailed out			
Adoption of Amendment(s) (CHE				
■ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap		st for the amendment(s)		
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):				
"The number of votes cast for the amenda	ment(s) was/were sufficient for ap	pproval		
by(votin				
(votin	g group)			
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.				
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.				
Dated C-5-	<u></u>			
al.)				
Signature (By a director, president or other officer if directors or officers have not been				
selected, by an incorporator - if in the hands of a receiver, trustee, or other court				
appointed fiduciary by that fiduciary)				
Muhanned Farraj				
(Typed or printed name of person signing)				
President				
(Title of person signing)				