

P04000143005

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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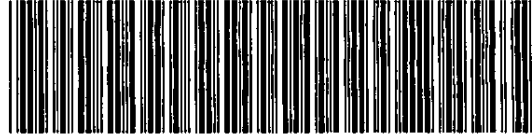
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 JUN 20 PM 1:05

JUN 24 2016
C LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LOUKAN SECURITY, INC.

DOCUMENT NUMBER: P04000143005

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

Please return all correspondence concerning this matter to the following:

JIHAN OMAR HAIDAR, Personal Representative of the Estate of Naji Chafic El-Kadi

Name of Contact Person

Peter J. Snyder, P.A.

Firm/ Company

4700 NW BOCA RATON BLVD. #103

Address

BOCA RATON, FL 33431

City/ State and Zip Code

psnyder@lawinboca.com

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

For further information concerning this matter, please call:

Jihan Omar Haidar, PR of the Estate of Naji Chafic El-Kadi at (786) 442-5882

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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

LOUKAN SECURITY, INC.

2016 JUN 20 PM 1:05

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

P04000143005

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

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 _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (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

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>S/T</u>	<u>JIHAN OMAR HAIDAR, Personal R</u>	<u>c/o Peter J. Snyder, P.A.</u>
<input type="checkbox"/> Add			<u>4700 NW Boca Raton Blvd. #103</u>
<input checked="" type="checkbox"/> Remove			<u>Boca Raton, Fl 33431</u>
2) <input type="checkbox"/> Change	<u>PST</u>	<u>NISREEN TOUFIC ALGHAWI</u>	<u>11904 SW 155 CT</u>
<input checked="" type="checkbox"/> Add			<u>MIAMI FLORIDA 33196</u>
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

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

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(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: 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) (CHECK ONE)

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ 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 amendment(s) was/were sufficient for approval

by _____."
(voting 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.

06/08/2016
Dated _____

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)

JIHAN OMAR HAIDAR , as a personal representative of the Estate of Naji Chafic Elkad

(Typed or printed name of person signing)

past President /past secretary/past treasurer

(Title of person signing)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 JUN 20 PM 1:05

IN THE CIRCUIT COURT FOR PALM BEACH
COUNTY, FLORIDA PROBATE DIVISION

IN RE: ESTATE OF

NAJI CHAFIC EL-KADI

Deceased.

File No.:
502016CP002325XXXXSB
Division: IY

LETTERS OF ADMINISTRATION
(single personal representative)

TO ALL WHOM IT MAY CONCERN

WHEREAS, Naji Chafic El-Kadi, a resident of Palm Beach County, Florida, died on April 21, 2016, owning assets in the State of Florida, and

WHEREAS, Jihan Omar Haidar, Decedent's Spouse, has been appointed personal representative of the estate of the Decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned Circuit Judge, declare Jihan Omar Haidar duly qualified under the laws of the State of Florida to act as personal representative of the estate of Naji Chafic El-Kadi, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED on May 19, 2016.



STATE OF FLORIDA • PALM BEACH COUNTY

I hereby certify that the foregoing is a true copy as recorded in my office and the same is in full force and effect.

THIS 19 DAY OF May, 2016
SHARON R. BOCK
CLERK & COMPTROLLER

[Signature]
CIRCUIT COURT JUDGE

Copies Furnished to: [Signature]
DEPUTY CLERK

Peter J. Snyder, Esq., Peter J. Snyder, P.A., Attorney for Petitioner, 4700 NW Boca Raton Blvd., Suite 103, Boca Raton, FL 33431; psnyder@lawinboca.com; eService@lawinboca.com

Estate must be closed 12
months from the date of order