| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Add | dress) | |
| (Add | dress) | |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



300309386143

05/07/18--01008--027 **35.00

R. WHITE MAY 0 8 2018

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION | KWIK ST | OP 7 AVE INC | | |
|--|---|---|-----------------------------|--|
| DOCUMENT NUMBER: | P0500008 | 31113 | | |
| The enclosed Articles of Amer | dment and fee are su | ubmitted for filing | . | |
| Please return all correspondence | e concerning this ma | atter to the followi | ng: | |
| | ТНАМА | RA PEREZ | | |
| | | Name of Cont | act Perso | n |
| | TABADES | SA ASSOCIATES | S | |
| | | Firm/ Cor | mpany | |
| | 419 W 49t | h ST SUITE# 111 | | |
| | | Addre | ess | |
| | HIALEAH, | FL 33012 | | |
| | | City/ State and | l Zip Cod | e |
| | TAMMYP@TA | ABADESA.COM | | |
| E-n | nail address: (to be us | | ual report | notification) |
| For further information concern | ning this matter, pleas | se call: | 305 | 558-0622 |
| Name of Contac | et Person | at (| |)de & Daytime Telephone Number |
| Enclosed is a check for the foll | | payable to the Flo | | • • |
| | 43.75 Filing Fee & ertificate of Status | □\$43.75 Filing Certified Cop (Additional control enclosed) | ру | □\$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 | | | Amend Divisio Clifton | Address ment Section n of Corporations Building xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation



18 MAY -7 PM 2: 42

KWIK STOP 7 AVE INC

SECRITALE PAGIALE
TALLAMATEM FLORIDA

to

| (Name of Corporation | on as currentl | | ida Dept. of State | |
|---|-----------------|-------------------------|----------------------|--------------------|
| P05000081113 | | | | |
| (Docum | nent Number of | f Corporation (if know | vn) | |
| Pursuant to the provisions of section 607.1006, Florida ts Articles of Incorporation: | Statutes, this | Florida Profit Corpo | ration adopts the fo | ollowing amendment |
| A. If amending name, enter the new name of the co | rporation: | | | |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the c | " "Inc," or " | Co". A professional | | |
| B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADD</u> | | | | · |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or registered | ed office addr | | the name of the | |
| new registered agent and/or the new registered of | office address: | 1 | _ | |
| Name of New Registered Agent | - · | | <u></u> | |
| | (Florida stre | eet address) | | |
| New Registered Office Address: | | | Florida | |
| Ties the Spice of Than the | (| (City) | , | (Zip Code) |
| New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent. I | stered Agent: | (City) | , Florida | • |
| Signa | ture of New Ro | egistered Agent, if che | anging | |

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 D | <u>oe</u> | |
|----------------------------|--------------|---------|--------------|------------------|
| X Remove | <u>v</u> | Mike Jo | <u>ones</u> | |
| X Add | <u>sv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | | NAHIDA HOQUE | 13695 NW 7TH AVE |
| X Add | | | | MIAMI, FL 33168 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| If amending or adding addi Attach additional sheets, if n | ecessary). (Be sp | vecific) | | | |
|--|-------------------|---|---------------------------------------|---------------------------|---------|
| | | | . , | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | • | | | | |
| | | | | | |
| | | | | | |
| If an amendment provides f provisions for implementin (if not applicable, indica | ig the amendment | eclassification, or if not contained | cancellation of is in the amendmen | sued shares, t itself: | |
| | | | | | |
| | | | | | <u></u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| The date of each amendment(s) adoption: | , if other than the |
|--|--|
| date this document was signed. | |
| Effective date <u>if applicable</u> : | |
| (no more than 90 days after amendment file dat | e) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requireme document's effective date on the Department of State's records. | nts, this date will not be listed as the |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the are by the shareholders was/were sufficient for approval. | nendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment. | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" (voting group) | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required. | shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required. | eholder |
| Dated 05/01/2018 | |
| Dated 05/01/2018 Signature W Lhalf | |
| (By a director, president or other officer – if directors or officers have selected, by an incorporator if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary) | e not been |
| MOHAMMAD KHALED | |
| (Typed or printed name of person signing) | |
| PRESIDENT | |
| (Title of person signing) | · · · · · · · · · · · · · · · |