## P06000010019

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: Migmi	Vellow Cab	Inc.
DOCUMENT NUMB	er: <u>P0600</u>	0010019	Inc.
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	tter to the following:	
	()	Jack Re Name of Contact Person  Fast Tax  Firm/Company  113 North Fed  Address	1
		Seach for City/State and Zip Code days for future annual report	
For further information	concerning this matter, pleas	se call:	
	Ic Bell Contact Person	at ( 954	) 923-104C de & Daytime Telephone Number
	the following amount made p		
S35 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	ing Address idment Section ion of Corporations Box 6327	Amend Divisio	Address ment Section on of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

" Articles of Incorporation
of
MIAMI VELLOW CAB, INC
(Name of Corporation as currently filed with the Florida Dept. of State)
PO(0.00(1.00))
(Document Number of Corporation (if known)
(Document Number of Corporation (it 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:
N/A 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)  Miami, FL 33142
C. Enter new mailing address, if applicable: (Mailing address MAYBE A POST OFFICE BOX)  POBOX 420512  MIAMI, R. 33242
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: $\mu/h$ . Florida . (7in 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.
/4
Signature of New Registered Agent, if changing
Signature of New Keytstered 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.

Mike Jones, V as Rem Example:	iove, and Sally Smi	ith, SV as an Add.	_
X Change	PT John	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	v Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X_Change	PUP	Dawood Akhfar	PO BOX 420512
Add			Migmi, FZ 33242
Remove			
2) Change	Securior state States and Physique.		
Add			
Remove			
3) Change	on other belletited and real self-real field beliefe and	**************************************	
Add			**************************************
Remove			
4)Change			
Add			
Remove			
5) Change	ar and a state of the state of		
Add			
Remove			1P. Annual of the second secon
6) Change			
Add			
Remove			_

Attach additional sheets, if necessary).	. (Be specific)
	N/A
	1
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If an amendment provides for an exc	change, reclassification, or cancellation of issued shares, rendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	1
	N/A
ap, us er en fallet er <sub>en skriver</sub> n <del>geme</del> nnen vert et det <del>green, op gemeen</del> te mit allet til til gemeen op gedeliche	
and the second s	

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

•	The date of each amendment(s) adoption: August 7, 2013 date this document was signed.	if other than the
	Effective date if applicable: August 72013 (no more than 90 days after amendment file date)	
	Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
	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.	
	Dated August 7, 2013 Signature	
	(By a director, president of 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)	u u u u u
	Dawood Akhter	
	(Typed or printed name of person signing)	
	(Title of person signing)	e cus
	(1 me of berzon signing)	