

Florida Department of State Division of Corporations

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(((H10000054918 3)))



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

COR AMND/RESTATE/CORRECT OR O/D RESIGN STAR #2, INC.

Certificate of Status Certified Copy Page Count 03 \$43.75 Estimated Charge

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EXAMINER

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3/10/2010

EMPIRE CORP KIT

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03/10/5010 14:00

Articles of Amendment to Articles of Incorporation

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STAR #2	2, INC.		
(Name of Corporation as currently for	iled with the Florida Dept. of State)		
P06000018208			
(Document Number of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Floramendment(s) to its Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following		
A. If amending name, enter the new name of the co	orporation:		
	The new		
	ord "corporation," "company," or "incorporated" or the nation "Corp," "Inc," or "Co". A professional corporation nat association," or the abbreviation "P.A."		
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDR	: 1502 NW 1 CT		
	MIAMI FL 33136		
•	- Louisian Landing		
C. Enter new mailing address, if applicable:	-10 PM 2: 3 ASSEC, FILOR		
(Mailing address MAY BE A POST OFFICE BO	w		
	<u> </u>		
D. If amending the registered agent and/or register new registered agent and/or the new registered			
Name of New Registered Agent: NIJM	IEH M SAFI		
<u>1535</u>	6 SW 21ST PL		
New Registered Office Address:	(Florida street address)		
MIRA	MAR, Florida_ <u>33027-43</u> 87		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.		
•			
Slove of	Timeh Sati		

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removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Address Type of Action Title Name MAHMOUD SHATAT DIR ☑ Add 15356 SW 21ST PL ☐ Remove MIRAMAR FL 33027-4387 ☐ Add ☐ Remove □ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (stach additional sheets, if necessary). (Be specific)
TO PROTECT INVESTMENT WHERE MAHMOUD SHATAT OWNS 51% OF THE CAPITAL STOCK. F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

If amending the Officers and/or Directors, enter the title and name of each officer/director being

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The date of each amendmen	t(s) adoption: 3-5-2010	H10000054918
Effective date if applicable:	3-5-2010 (date of adopti	ion is required)
	(no more than 90 days after ame	ndment file date)
Adoption of Amendment(s)	(CHECK ONE)	
	are adopted by the shareholders. There sufficient for approval.	he number of votes cast for the amendment(s)
		arough voting groups. The following statement vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/we	re sufficient for approval
by		
	(voting group)	
The amendment(s) was/we action was not required.	ere adopted by the board of director	rs without shareholder action and shareholder
The amendment(s) was/we action was not required.	πe adopted by the incorporators wi	thout shareholder action and shareholder
Dated 3-5-	2010	-
Signature_	« Nismeh Safi	
se!	y a director, president or other offic ected, by an incorporator – if in the pointed fiduciary by that fiduciary)	cer — if directors or officers have not been e hands of a receiver, trustee, or other court
	NUMER	 HM SAFI
	(Typed or printed na	me of person signing)
		NDIRECTOR
	(Title of person signing)	

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