POCOCC. 1 53(da)

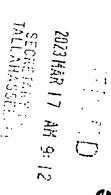
(Red	questor's Name)	
(Add	dress)	
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(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	
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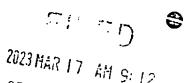


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MARAYA RESTA	URANT CORPORATION	<u>'</u>
DOCUMENT NUMB	P06000153660		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	VIOLETTE HADDAD		
		Name of Contact Person	n
		Firm/ Company	
	2724 BARTLET DR		
		Address	
	KISSIMMEE, FL 34741	<u>-</u>	
		City/ State and Zip Cod	c
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
VIOLETTE HADDA	D	at (407	731-6638 ode & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 chassee, FL 32314	Ameno Divisio The C 2415	Address dment Section on of Corporations dentre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of



MARAYA RESTAURANT CORPORATION	S=0= AM 9: 12
(Name of Corporat	ion as currently filed with the Florida Dept. of State)
P06000153660	TEANNAULE, I.
(Docu	ment Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the c	corporation:
MARAYA CORPORATION I	The new
	corporation," "company," or "incorporated" or the abbreviation "Corp.," ," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicabl	le:
(Principal office address <u>MUST BE A STREET AD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u>OX</u>)
D. If amending the registered agent and/or registence new registered agent and/or the new registered	ered office address in Florida, enter the name of the
N/A	TOTAL AGGICANT
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re	gistered Agent:
nereoy accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
Sign	nature of New Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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)	<u>Title</u>	<u>Name</u>	Ad	<u>dres</u> s
1) Change			N//	<u> </u>
Add				
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove			_	
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

4	ecessary). (Be specific)		
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If an amendment provides f	for an exchange reclassificatio	n, or cancellation of issued shar	AC
provisions for implementing	ng the amendment if not contain	ned in the amendment itself:	<u></u>
(if not applicable, indice	ate N/A)		
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	FEBRUARY 24 2023
	endment(s) adoption: if other than th
date this document w	as signed.
	FEBRUARY 24 2023
Effective date if app	licable: (no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Note: If the date ins document's effective	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
Adoption of Amend	ment(s) (<u>CHECK ONE</u>)
The amendment(s action was not req) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder uired.
) was/were adopted by the shareholders. The number of votes cast for the amendment(s) rs was/were sufficient for approval.
) was/were approved by the shareholders through voting groups. The following statement by provided for each voting group entitled to vote separately on the amendment(s):
"The number	r of votes cast for the amendment(s) was/were sufficient for approval
by	w.
~; <u></u>	(voting group)
	FEBRUARY 24 2023
Da	FEBRUARY 24 2023 ted
Sie	nature Maddad
	(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)
	VIOLETTE HADDAD
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)