(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Patta	wi coxp.	
DOCUMENT NUMBER: Poquo o	217/3	
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Imad R. (Name of	Alpattawi Contact Person)	
<u>Gattawi</u> (Firm	COYP '	
5150 W. IX	lo Bronson men	norial Hwy.
Kissimmee F(City/Stat	. 34746 e and Zip Code)	
For further information concerning this matter, pl	lease call:	
Imad R. Algastaw. (Name of Contact Person)	at (<u>407</u>) <u>276</u> - (Area Code & Daytime Te	o863
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times \$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)
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	e

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

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(Name of corporation as currently filed with the Florida Dept. of State) AHASSEE, FLORIDA
(Name of corporation as currently filed with the Florida Dept. of State)AHASSEE, FEORIDA
Pogooo 2/7/3 (Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(Must contain the word "corporation," company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
<u>AMENDMENTS ADOPTED</u> - (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (<u>BE SPECIFIC</u>)
I would like to arrend to arrange the
principal business address, R.A. Address
Business. Address & RA-address
5150 W. Irlo Bronson memorial Hwy. Missimmer pl 34746 1 othicer Address
Missimmer pl 34746
1 officer Address
6170 old Farm Ln.
Gurnee IL. 6003/ (Attach additional pages if necessary)
If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption: 4-1-09
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were approved 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.
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)
(Typed or printed name of person signing)
Imad R. Algartawi, (Typed or printed name of person signing) Owner President (Title of person signing)

FILING FEE: \$35