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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Anerl C.COULLIETTE MAY 06299

EXAMINER

COVER LETTER •

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: <u>NATAREESH INC.</u> | | G |
|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: P09000022627 | | |
| The enclosed Articles of Amendment and fee ar | e submitted for filing. | |
| Please return all correspondence concerning this | matter to the following: | |
| OSAMA SARSOUR | | |
| (Name o | f Contact Person) | |
| | NATAREESH INC | |
| (Firr | n/ Company) | |
| 14452 S | SW 83 STREET | |
| (| Address) | |
| | /II FL 33183 US ate and Zip Code) | |
| For further information concerning this matter, p | • | |
| OSAMA SARSOUR | at (` 954) <u>86</u> 4-494 | n |
| (Name of Contact Person) | (Area Code & Daytim | e Telephone Number) |
| Enclosed is a check for the following amount ma | ade payable to the Florida De | partment of State: |
| \$35 Filing Fee \$\ \times \text{Status}\$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 C | |

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

| NATAREESH INC. | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| (Name of Corporation as currently filed with the | e Florida Dept. of State) |
| P09000022627 | · |
| (Document Number of Corporation | n (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes following amendment(s) to its Articles of Incorporation: | s, this Florida Profit Corporation adopts the |
| A. If amending name, enter the new name of the corporation: | |
| The new name must be distinguishable and contain the "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," "Co". A professional corporation name must contain association," or the abbreviation "P.A." | or the designation "Corp," "Inc," or |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | 7 SECRE |
| - | ASSET |

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

| D. | new registered agent and/or the new re | r registered office address in Florida, ento egistered office address: | er the name of the |
|----|----------------------------------------|---------------------------------------------------------------------------|--------------------|
| | Name of New Registered Agent: | | _ |
| | New Registered Office Address: | (Florida street address) | _ |

(City)

Florida_

(Zip 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.

Signature of New Registered 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)

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------------|----------------|
| <u>VP</u> | OMAR SARSOUR | 810 ALTA VISTA TER DAVIE, FL 33325 | |
| SEC. | SUHEIL ISBEIH | 1834 N. UNIVERSITY DR PLANTAION, FL 33322 | |
| | | | |
| | ling or adding additional Articles, dditional sheets, if necessary). (Bo | | |
| provisio | | ge, reclassification, or cancellation of ent if not contained in the amendmen | |
| | | | |
| | | | |

| The date of each amendment(s) adoption: | | |
|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Effective date <u>if applicable</u> | <u>.</u> | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s | (CHECK ONE) | |
| | were adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval. | |
| | were approved by the shareholders through voting groups. The following statement ided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of vot | es cast for the amendment(s) was/were sufficient for approval | |
| by | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| • | (voting group) | |
| action was not required. | were adopted by the board of directors without shareholder action and shareholder were adopted by the incorporators without shareholder action and shareholder | |
| Dated_04/ | 20/09 | |
| () s | By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary) OSAMA SARSOUR (Typed or printed name of person signing) | |
| | | |
| | PRESIDENT | |
| | (Title of person signing) | |