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DIVISION OF STEPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORI	PORATION:	GRAND BAZAAR USA INC.		
DOCUMENT NUMBER:		P09000038440		
The enclosed Artic	cles of Amendment and fee	are submitted for filing.		
Please return all co	orrespondence concerning th	is matter to the following:		
		NDREEA WILDNER		
	1	Name of Contact Person		
		Firm/ Company		
2860 FAIR GREEN DR				
		Address		
•		ARWATER, FL 33761 City/ State and Zip Code		
	andreea	@besttaxoffice.com ed for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
A	ndreea Wildner of Contact Person	at (
		Area Code & Daytime Telephone Number nade payable to the Florida Department of State:		
 	\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

GRAND B	AZAAR USA INC.	3 SEP 2	8 AL
(Name of Corporation as curre		ent. of State)	8 AM 11:45
\ <u> </u>		<u> </u>	. 0
	000038440 nber of Corporation (if known)		
(Document Num	noer of Corporation (It known))	
Pursuant to the provisions of section 607.1000 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>Flori</i>	da Profit Corporation ado	pts the following
A. If amending name, enter the new name of	f the corporation:		
	N/A		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "Inc,"	or "Co". A professional c	d" or the orporation
B. Enter new principal office address, if app	licable:		_
(Principal office address MUST BE A STREE	T ADDRESS)		
	_		
			_
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)	: CE BOX)		-
			_
D. If amending the registered agent and/or r		lorida, enter the name of t	<u>he</u>
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street addr	ess)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing	na Dagistanad A santi		
I hereby accept the appointment as registered a	ik neristereu Agent; gent. I am familiar with and i	accept the obligations of the	position
	•		<u>*</u>

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>	Address	Type of Action
VP	SERDAR SIRKECI,	10429 HARBORBLUFF WAY TAMPA FL 33615 US	☐ Add ☑ Remove
<u>p</u>	ILKAY GULSEN	1212 E. WHITING STREET #20 TAMPA, FL 33602	☑ Add ☐ Remove
			☐ Add ☐ Remove
	ding or adding additional Articles, of dditional sheets, if necessary). (Be a		
<u>provisi</u>	mendment provides for an exchange ons for implementing the amendment of applicable, indicate N/A)	e, reclassification, or cancellation of iss at if not contained in the amendment i	ued shares, tself;

The date of each amendmen	t(s) adoption: 09/20/09
Effective date <u>if applicable</u> :	09/20/09 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_09/2	20/09 MI MI MI MI
Signature	- I MAN / WVY
(By	y a director, president or other officer - if directors or officers have not been
aph	ected, by an incorporator — if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
"FF	none notice of the industry)
	MURAT EKDI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)