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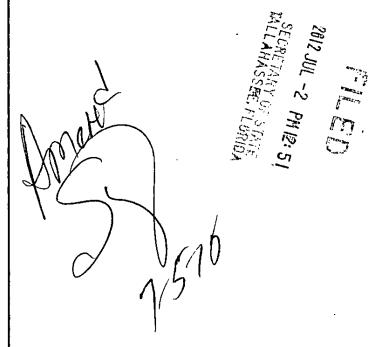
(Re	questor's Name)	
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	dress)	
(Cit	:y/State/Zip/Phone	e #)
PIÇK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Sect Division of Corp		With Land Square	
NAME OF CORPO	RATION: 641 Shamr	ock INC	
DOCUMENT NUM	BER: P1000002219	3	
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Ifaz Parvez		
		Name of Contact Person	ı
		. ,,,	
		Firm/ Company	
	7817 NW 40 St.	•	
		Address .	
	Hollywood, FL-33	024	
		City/ State and Zip Code	•
ifo-	z nanyaz@yahaa	com	
1182	z_parvez@yahoo.	ed for future annual report	notification)
	E-man address. (to be us	sed for future aimidal report	notification)
For further informatio	n concerning this matter, pleas	e call:	
Mosharrof Pa	arvez	_{at (} 786	302-0404
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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)
Am Div	iling Address endment Section ision of Corporations . Box 6327	Amend Divisio	Address ment Section n of Corporations Building
	lahassee, FL 32314	2661 E	xecutive Center Circle issee, FL 32301

Articles of Amendment Articles of Incorporation

3.5	MED
*** J///	
INCOME.	2 PM 12: 5.1
	E. FLORIE

641 Shamrock INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000022193

(Document Number of Corporation (if known)

lment(s) to

If amending name, enter the new name of th	<u>ie corporation:</u>		
nne must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation "C ord "chartered," "professional association," or	Corp," "Inc," or "Co". A pre	iny," or "incorporated" or th ofessional corporation name m	ie abl
Enter new principal office address, if applic	able:		
rincipal office address <u>MUST BE A STREET A</u>	<u>ADDRESS</u>)	,	
	**		
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u>)		
If amending the registered agent and/or reg new registered agent and/or the new registe		ida, enter the name of the	
Name of New Registered Agent			
Name of New Registered Agent	(Elavida etvost address)		
Name oj New Registerea Agent	(Florida street address)		
Name of New Registered Agent New Registered Office Address:	(Florida street address) (City)	, Florida(Zip Code	

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.

THE CONTRACTOR

Example: **X**Change <u>PT</u> John Doe X Remove <u>v</u> Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address (Check One) 1) ____ Change CEO Ifaz Parvez 7817 NW 40 St, X Add Hollywood, FL-33024 Remove 2) ____ Change ____ Add ____ Remove 3) ____ Change ____ Add __ Remove 4) ____ Change __ Add ` Remove 5) ____ Change ___ Add Remove 6) ____ Change ___ Add ____ Remove

attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
•	
	en stadiotest.
	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendmen	t(s) adoption: 6/10/2012
Effective date <u>if applicable</u> :	6/11/2012
. <u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
	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 led for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	
action was not required.	ere adopted by the board of directors without shareholder action and shareholder ere adopted by the incorporators without shareholder action and shareholder
action was not required.	To adopted by the interpolators without shareholder action and shareholder
_{Dated} <u>6/1</u>	0/2012
Signature _	ant
S	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)
	ZINAT PARVEZ
	(Typed or printed name of person signing)
	POTS
	(Title of person signing)