# P1000010112Z

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(Ac	ddress)	
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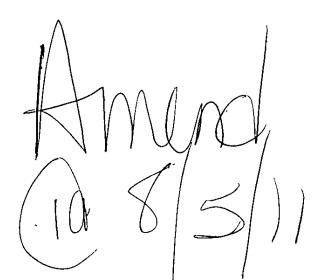


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SECRETARY OF STAIL OVISION OF CORPORATIONS



#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION:	AFIFA ENTERPR	ISES, INC
DOCUMENT NU	MBER:	P100001	01722
The enclosed Artic	les of Amendment and fee	are submitted for filing.	
Please return all co	rrespondence concerning th	nis matter to the following	:
	M	OHAMMED ABSAR	
		Name of Contact Person	
	CARRIGAN MAKOFSKE L.L.P		<b>5</b>
•		Firm/ Company	
	3910 NOF	RTHDALE BLVD SUITE	100
•		Address	
	TAN	MPA, FLORIDA 33624	
·	(	City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
·	ABSAF E-mail address: (to be us	R@VERIZON.NET	fication)
For further informa	tion concerning this matter	, please call:	·
THOMA	S J CARRIGAN CPA	at ( 813 )	964-5502
Name	of Contact Person	Area Code & Da	sytime Telephone Number
Enclosed is a check	for the following amount of	nade payable to the Florid	a Department of State:
\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is en	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad		Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corpora	tions
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Cen	ter Circle

Tallahassee, FL 32301

### **Articles of Amendment Articles of Incorporation** of

#### AFIFA ENTERPRISES INC

(Name of Corporation as currently filed with the Florida Dept. of State) P10000101722

(Document Number of Corporation (if known)

owing.

o, Honda Statutes, and F.	lorida Profit Corporation adopts the foll
f the corporation:	
the word "corporation," e designation "Corp," "Inc ofessional association," or	The new "company," or "incorporated" or the c," or "Co". A professional corporation the abbreviation "P.A."
olicable:	
<u>::</u>  CE BOX  	
registered office address in istered office address:	n Florida, enter the name of the
	<del></del>
(Florida street a	address)
	, Florida (Zip Code)
(City)	(Zip Code)
	the word "corporation," e designation "Corp," "Incofessional association," or olicable: ET ADDRESS )  CE BOX  registered office address in istered office address:

## 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
President	YEHIA MOUSA	18562 US 19N CLEARWATER, FL 33764	_ ☑ Add _ □ Remove
<del></del>			
			_
	·		
		·	
<u>provisions</u>	dment provides for an exchange for implementing the amendme applicable, indicate N/A)	e, reclassification, or cancellation of is not contained in the amendment	ssued shares, itself:
	·		

The date of each amendmen	t(s) adoption: <u>07/12/2011</u>
Effective date <u>if applicable</u> :	07/12/2011 (date of adoption is required)
<del>- ,</del> ,	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) tere sufficient for approval.
The amendment(s) was/we must be separately provide	ere approved by the shareholders through voting groups. The following statement ed 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)
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
	Y 12, 2011
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	MOHAMMED ABSAR
	(Typed or printed name of person signing)
	(Title of person signing)