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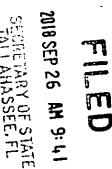
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| ATION: KHANON INC | | | |
|---|---|---|--|
| ER: P11000002397 | | | |
| f Amendment and fee are su | bmitted for filing. | | |
| ondence concerning this ma | tter to the following: | | |
| Mohamed F Khan | | | |
| | Name of Contact Person | 1 | |
| Chanon Inc | | | |
| | Firm/ Company | | |
| 12 Cranes Roost | | | |
| | Address | | |
| Royal Palm Beach, FL 33411 | L | | |
| • | City/ State and Zip Code | 2 | |
| ndavros@vahoo com | | | |
| | sed for future annual report | notification) | |
| is man address, (to be di | rea for taldie difficult report | Notification | |
| concerning this matter, pleas | se call: | | |
| | 305 | 780 0142 | |
| Contact Person | Area Co | de & Daytime Telephone Number | |
| the following amount made | payable to the Florida Depa | artment of State: | |
| □\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| ng Address | Street | Address | |
| Amendment Section | | lment Section | |
| Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 Tallahassee, FL 32314 | | Building Executive Center Circle | |
| | ER: P11000002397 ER: P11000002397 f Amendment and fee are subsondence concerning this mand Mohamed F Khan Chanon Inc 12 Cranes Roost Royal Palm Beach, FL 33411 Indgyros@yahoo.com E-mail address: (to be used to be | ER: P11000002397 FAmendment and fee are submitted for filing. Soundence concerning this matter to the following: Mohamed F Khan Name of Contact Person Chanon Inc Firm/ Company 112 Cranes Roost Address Royal Palm Beach, FL 33411 City/ State and Zip Cod Indgyros@yahoo.com E-mail address: (to be used for future annual report concerning this matter, please call: at (305 Area Co the following amount made payable to the Florida Depart S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Ing Address Ing | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Chanon Inc

2018 SEP 26 AM 9:41

| Knanon inc | |
|--|---|
| (Name of Corporatio | n as currently filed with the Florida Dept. of State CRETARY OF STAT |
| P11000002397 | TALLAHASSEE. FL |
| (Docume) | ent Number of Corporation (if known) |
| (Isotalia) | The realist of Corporation (it known) |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation: | Statutes, this Florida Profit Corporation adopts the following amendment(s) |
| A. If amending name, enter the new name of the cor | poration: |
| | The new |
| | "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI | RFSS) |
| The control of the same as sam | <u></u> , |
| | |
| | —————————————————————————————————————— |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | 0 |
| | |
| | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered o | |
| Name of New Registered Agent | |
| Name of New Registered Agent | |
| | (Florida street address) |
| New Registered Office Address: | Florida |
| The state of the s | (City) (Zip Code) |
| ew Registered Agent's Signature, if changing Regi | |
| Signu | ture of New Revistered Avent, 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)

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.

| Example: X Change | <u>PT</u> | John Doc | | |
|-------------------------------|---------------|--------------|--------------|----------------------------|
| X Remove | <u>V</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | Title | Name | | Address |
| 1) Change | CFO | Clyde Rich | nards Sr | 216 Cranes Roost |
| X Add | | | | Royal Palm Beach, Fl 33411 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | - | | | |
| Add | | | | |
| Remove | | | | |
| 1) Change | | - | | |
| Add | | | | |
| Remove | | | | |
| Change | | | | |
| Add | | | | |
| Remove | | | | |
| Change | | | | |
| Add | | | | |
| Remove | | | | |

| If amending or adding additional Arti (Attach additional sheets, if necessary). | icles, enter change(s) here: (Be specific) |
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| If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| | |
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| | |

| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
|---|---|--------------------------|
| Effective date <u>if applicable</u> : | | - |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the I | block does not meet the applicable statutory filing requirements, this date w Department of State's records. | ill not be fisted as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| | st for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were a action was not required. | dopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | |
| 09/21/20 | 18 | |
| DatedSignature | 11/20 9/21/2018 |) |
| (By a selec | director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary) | |
| | Mohamed F. Khan | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |