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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORAT	rion: La	Pita E	Xou	ess. Inc.	
DOCUMENT NUMBEI	e P110	000 121	<u>,                                    </u>		
The enclosed Articles of A	Amendment and fee are su	ibmitted for filing.		•	
Please return all correspon	ndence concerning this ma	atter to the following	ng:		
	Samil	Frihat			
	N	ame of Contact Pe	rson		
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		Vita E	: X pre	55 IV ( .	
		Firm/ Company	, / 1		
		C41 1.	, Ac	ive 1)	
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	E-mail address: (to be us	sed for future annu	al report	notification)	
	2			,	
For further information co	ncerning this matter, plea	se call:		•	
	S . 1				
5.40	Frihat		904	554-8877	
Nowe of C	ontact Person	at (	Arron Coa	le & Daytime Telephone Number	
Name of C	ontact reison		Area Coc	ie & Daytime Telephone Number	
Enclosed is a check for the	e following amount made	payable to the Flo	rida Depa	urtment of State:	
M eas Pilles Per	Make as publications of	Mean or piling	Ess A	□\$52.50 Filing Fee	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Certified Cop		Certificate of Status	
•	Certificate of Status.	(Additional of		Certified Copy	
,		enclosed)	ору із	(Additional Copy	
•		,		is enclosed)	
	Address			Address	
Amend	nent Section		Amend	ment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

A Company of the Comp Articles of Amendment Articles of Incorporation

(Name of Corporation as currently filed

owing

(Document Number	er of Corporation (	ir known)		
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes,	this <i>Florida Profit</i>	Corporation adopt	s the foll
A. If amending name, enter the new name of the	ne corporation:			
The new name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the dename must contain the word "chartered," "profes	esignation "Corp,	" "Inc," or "Co". A	4 professional cor	d" or the poration
B. Enter new principal office address, if applic	able:			
(Principal office address <u>MUST BE A STREET</u> A				
C. E. Assurance - Wassell as Mr. Walle				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	( ROX)		•	
			<del></del>	
				·
D. If amending the registered agent and/or reg	rietared office add	ress in Florida ente	er the name of the	
new registered agent and/or the new register	red office addres	<u>s:</u>	the mante of the	
Name of Nam Bootstood Amount		,		
Name of New Registered Agent:				
	/EI : I			
	(rioriaa sii	reet address)		
New Registered Office Address:			, Florida	7. 7.1
	(City)		(Zip (	.oae)
New Registered Agent's Signature, if changing	Registered Agen	<u>t:</u>	. 1 1:	
I hereby accept the appointment as registered age	nt. I am Jamiliar	wiin and accept the c	ougations of the p	OSILION.
Signature o	of New Registered	Agent, if changing		

. Page 1 of 4

If AMENDING	G the Officers and/or Directors, please	list all office	rs/directors of the corporation as you now want
the record to b	e. Please indicate the title(s), name and	address for e	ach officer/director.
(Our database	can index up to 6 officers/directors. If	vou have mo	re than 6 officers/directors, please list them on an
additional sheet	.)	,	a man a system and actions, produce that them on an
Title(s)	Name		Address
1)	Samir Frihat		6541 Low Drive N
			Julesonville, FZ 32216
2)	·		
•	•		
3)	*	<del></del>	<u> </u>
	·		
4)			
<del></del>			
5)		<del></del>	
		•	
6)	· · · · · · · · · · · · · · · · · · ·	· · .	
		•	
		•	
If REMOVING	an officer and/or director, please list th	e title(s) and	name of the officer/director to be removed:
Title(s)	Name	Title(s)	Name
1.0	Fadia AlzGool	4) !	<del></del>
*/ <del></del>	1-12(12 11 50 00)	4)	

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If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)		
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F. 1	If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
<del>.</del>	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
	· ·
	•
	1 1
	1/127/11
The c	late of each amendment(s) adoption:
	ا ا ا
Effec	tive date if applicable: 1/28 1
	(no more than 90 days after amendment file date)
Ador	otion of Amendment(s) (CHECK ONE)
raup.	(CHECK ONE)
TI	ne amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
by	the shareholders was/were sufficient for approval.
	· · · · · · · · · · · · · · · · · · ·
	the amendment(s) was/were approved by the shareholders through voting groups. The following statement
m	ust be separately provided 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)
	(voting group)
⊓乖	e amendment(s) was/were adopted by the board of directors without shareholder action and shareholder
8C	tion was not required.
	,
□ Th	ne amendment(s) was/were adopted by the incorporators without shareholder action and shareholder
act	tion was not required.
	MERYL S. LEHR
	Dated Notary Public - State of Florida
	My Comm. Expires Jul 10, 2013
	Signature Commission # DD 889606
	(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)
	o in Nain A
	Samir Frinat  (Typed or printed name of person signing)
	. (Typed or printed name of person signing)
	President
	(Title of person signing)