## P11000084067

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TALLAHASSEE, FLORIDA

## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** NAME OF CORPORATION: First Store, Inc. DOCUMENT NUMBER: P11000034067 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mohamed Ben Zarrouk
Name of Contact Person First Store, Inc 8004 Mandarin Dr Address Orlando, FC 32819 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mohamed Ben Zarrouk at (321) 663-6576

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

SECRETARY OF STATE TALLAHASSEE, FLORIDA

	Articles of Inco	rporation		
	of		12 SEP -7 P	4 3: 50
First_	Store, I	nc.	_	
(Name of Corporation as currently				<del></del>
	84067			
(Document Number o		known)		
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this F	lorida Profit Corpord	ation adopts the follo	owing amendment(s) t
A. If amending name, enter the new name of the c	corporation:			
				The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the B. Enter new principal office address, if applicable	p," "Inc," or "C e abbreviation "F	o". A professional o	incorporated" or the corporation name m	e abbreviation ust contain the
(Principal office address MUST BE A STREET AD				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>0X</u> )	3004 Orland	Mandarin 10, FL 32	D 819
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ss in Florida, enter t	he name of the	
Name of New Registered Agent	10hamed	Ben Zan	<u>rou</u> K	
	8004 <u>M</u> (Florida stree	andarin Dr 1 address)		
New Registered Office Address:	Orland (City)	<u>/</u>	lorida 3281 (Zip Code)	9
New Registered Agent's Signature, if changing Registered Agent.  I hereby accept the appointment as registered agent.  Machine Signature of N			igations of the positio	on.

## 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 <math>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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u>P</u> _	Alge Hreira	4077 West Columbia St
AddRemove		- -	Orlando, FL 32811
2) Change Add	<u>P</u>	Mohamed Ben Zarrouk	BOOY Mandarin Dr Orlando, FL 32819
Remove 3)ChangeAdd		- - -	
Remove 4) Change Add		- -	
Remove-			
Remove 6) Change		· · ·	
Add			
Kemove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
-	
···	
- Ala	
If an amendment provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij noi applicable, malcale WA)	
· · · <u>- · · ·</u>	

The date of each amendment(s) a	doption:
Effective date <u>if applicable</u> :	9/1/12 (no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval
by	(voling group)
·	(voling group)
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated	9/1/12
Signature	at the second se
	director, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
appoin	nted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	President
	(Title of person signing)