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COVER LETTER

TO: Amendment Section Division of Corporations

AHA Specialties,	Inc.				
NAME OF CORPORATION:					
of Amendment and fee are su	bmitted for filing.				
pondence concerning this ma	tter to the following:				
Waseem Ansari					
	Name of Contact Person	n			
AHA Specialties Inc.					
	Firm/ Company				
14138 Fox Glove St.					
Address					
Winter Garden, FL 34787					
	City/ State and Zip Cod	e			
nsari@ahawater.com				30 1	, .
E-mail address: (to be used for future annua	l report notification)	\$4	4	
n concerning this matter, pleas	se call:		7		
	321	231.9409		÷	
of Contact Person			mber	است	
r the following amount made	payable to the Florida Dep	artment of State;			
□\$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)			
ling Address					
	ER: CC1700082648 ER: Of Amendment and fee are surpondence concerning this may waseem Ansari AHA Specialties Inc. 14138 Fox Glove St. Winter Garden, FL 34787 Insari@ahawater.com E-mail address: In concerning this matter, please of Contact Person In the following amount made \$\square\$43.75 Filing Fee & Certificate of Status	ER: CC1700082648— Plocococococococococococococococococococ	ATION: CC-1700082648- Of Amendment and fee are submitted for filing. pondence concerning this matter to the following: Waseem Ansari Name of Contact Person AHA Specialties Inc. Firm/ Company 14138 Fox Glove St. Address Winter Garden, FL 34787 City/ State and Zip Code Insari@ahawater.com E-mail address: (to be used for future annual report notification) In concerning this matter, please call: Certificate of Status Certificate of Status Certificate Copy (Additional copy is enclosed) Iting Address Street Address Street Address	ATION: ER: CC1700082648 Place Submitted for filing. pondence concerning this matter to the following: Waseem Ansari Name of Contact Person AHA Specialties Inc. Firm/ Company 14138 Fox Glove St. Address Winter Garden, FL 34787 City/ State and Zip Code Benail address: (to be used for future annual report notification) The concerning this matter, please call: at (321	Arrions: ER: GC1700092648 — Plococolos of Amendment and fee are submitted for filing. pondence concerning this matter to the following: Waseem Ansari Name of Contact Person AHA Specialties Inc. Firm/ Company 14138 Fox Glove St. Address Winter Garden, FL 34787 City/ State and Zip Code B-mail address: (to be used for future annual report notification) at (321 231.9409 at (3

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

Articles of Amendment to Articles of Incorporation of

AHA Specialties, Inc.		
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	-
EC1700082648 P110000 90625		
(Document Number of Corporation (if I	known)	-
Pursuant to the provisions of section 607.1006, Florida Statutes, this c Incorporation:	corporation adopts the following amendment(s) to its Articles of
A. If amending name, enter the new name of the corporation:		
NA		_The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must	bbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N 12	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	14 DCT -2 MY ID: 10
D. If amending the registered agent and/or registered office address	ss in Florida, enter the name of the	
Name of New Registered Agent N A	£1.7	0.10
(Florida stre	eet address)	
New Registered Office Address:	, Florida	_
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with a signature of New Registered Agent.		

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: XChange	<u>PT</u>	John Doc	
X Remove	Y	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Change	PTD	Waseem Ansari	14138 Fox Glove St.
Add			Winter Garden, FL 34748
Remove			
2) Change	Р	Shireen Ansari	14138 Fox Glove St.
Add	 -		Winter Garden, FL 34748
X Remove			
3) Change	-		
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

(Attach addition	r adding additional Articles, enter change(s) here: nal sheets, if necessary). (Be specific)
NIA	
	· · · · · · · · · · · · · · · · · · ·
 	
If an amendm	ent provides for an exchange, reclassification, or cancellation of issued shares,
	r implementing the amendment if not contained in the amendment itself: plicable, indicate N/A)
	eari now owns 100% of the company's issued shares.
	, , , , , , , , , , , , , , , , , , ,

	7/1/2014	
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)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were as by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
	opproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	t
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were acation was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were acation was not required.	dopted by the incorporators without shareholder action and shareholder	
9/29/20	14	
Dated		
Signature	malkul	
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Waseem Ansari	
	(Typed or printed name of person signing)	
	President/Treasurer/Director	
	(Title of person signing)	AH III
		0