## P12000000987

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01/10/12--01010--006 \*\*35.00

Amend

SECRETARY OF STATE

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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: FADI PETROLEUM INC. DOCUMENT NUMBER: P12000000987 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MAHD NUBANI Name of Contact Person FADI PETROLEUM Firm/ Company 4850 SW 100 ST Address OCALA, FLORIDA 34476 City/ State and Zip Code \_VENAD@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MAHD NUBANI Name of Contact Person Area Co c & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Elorida Depa tment of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy

**Mailing Address** 

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TO: Amendment Section

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

enclosed)

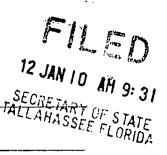
Street Address

(Additional Copy

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

is enclosed)

## Articles of Amendmen to Articles of Incorporatio 1 of



(Name of Corporation as currently filed with the Florida De t. of State)

## P12000000987

ent(s) to

ursuant to the provisions of section 607.1006, F s Articles of Incorporation:	Iorida Statutes, thi	s Florida Profit Co	<i>orporation</i> ad	opts the following a
If amending name, enter the new name of	the corporation:			
me must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	Corp," "Inc," or	"Co". A professi		
Enter new principal office address, if appli rincipal office address MUST BE A STREET				
mema office dadiess most be A STREET	ADDRESS )			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	, (*) E BOX) ,	· · · · · · · · · · · · · · · · · · ·		
		l · ş — — —		
If amending the registered agent and/or renew registered agent and/or the new regist			nter the nam	e of the
Name of New Registered Agent		_	<u> </u>	
	(Florida st	reet address)	<del></del>	
New Registered Office Address:	(City,		, Florida_	(Zip Code)
	(City)	,		(Zip Code)
w Registered Agent's Signature, if changing ereby accept the appointment as registered age	Registered Agent ent. I am familiar	: t <u>:</u> with and accept th	e obligations	of the position.
		•	-	-

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 Doe	3	•	
X Remove	<u>V</u>	Mike Jones	f		
<u>X</u> Add	<u>SV</u>	Sally Smith	, t		
Type of Action (Check One)	Title	<u>Name</u>		r	Address
1) X Change Add Remove	Р	MAHUD NA	ABANY		4850 SW 100 ST OCALA, FL 34476 US
2) X Change X Add Remove	<u>P</u>	MAHD NUB	3ANI	·	4850 SW 100 ST OCALA, FL 34476 US
Change Add Remove					
4) Change Add Remove					
5) Change Add Remove					
6) Change Add Remove		Curre	dian in	llií spe	Hiner of name

famending or adding additional Articature attach additional sheets, if necessary).	(Be specific)	<del></del>	
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THE TRUE AND SHARES A			
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	<b>W</b> . G.		
If an amendment provides for an excha provisions for implementing the amen	inge, reclassification, o dment if not contained	r cancellat on of issued shares. in the amondment itself:	ı
(if not applicable, indicate N/A)		,	
	<u> </u>		

The date of each amendment(s) ac	option: 01/09/2012
Effective date <u>if applicable</u> : 01	/09/2012
	(no more than 90 days after a nendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) licient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separate v on the amendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient fc approval
by	(voting group)
,	(voting group)
action was not required.  The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action and shareholder
Dated 01/09/	
Signature	Maluel Clabeci
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diductory by that fiductory)
_	MAHD NUBANI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)
	A Company of the Comp

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