## 1120000004155

(Requestor's Name)
(Nequestor's Ivame)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· ——
Special Instructions to Filing Officer:
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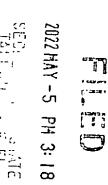
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of 5/10/2022

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FIRST O	CHOICE GROCE	RY INC		
DOCUMENT NUMBER: P1200000 4155					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.			
Please return all corresp	pondence concerning this ma	tter to the following:			
	ALI TAJE	DDINE			
_	7,-2	Name of Contact Person			
	Face CU				
<del>-</del>	TIKEL CH	OFCE GROCE	RYINC		
		Firm/ Company			
_	1714 COUNT	Y KO I			
DUNEDIN FL 34698  City/ State and Zip Code					
	DUNEDIN	FL 34698			
_		City/ State and Zip Cod	e		
_	Tajcola AoL E-mail address: (to be us	·com			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information concerning this matter, please call:					
1 of future information	concerning and matter, preas	se can.			
ALI TAJEDDINE at 727 1424 3900					
	f Contact Person	at ( 1017	_) 424 3900 de & Daytime Telephone Number		
Name of	r Contact r etson	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
☐ \$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	Fless so rive - re-		
□ 355 i timg i cc	Certificate of Status	Certified Copy	☐\$52.50 Filing Fee Certificate of Status		
		(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 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810					



April 24, 2022

ALI TAJEDDINE 1714 COUNTY ROAD 1 DUNEDIN, FL 34698

SUBJECT: FIRST CHOICE GROCERY INC

Ref. Number: P12000004155

We have received your document for FIRST CHOICE GROCERY INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 122A00009540

Claretha Golden Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment Articles of Incorporation of

FILED

FIRST CHOICE GRE	OCERY INC
(Name of Corporation as curren	ntly filed with the Florida Dept. of State 2022 HAY -5 PH 3: 1
_ P12000004155	SECOND STATE OF Corporation (if known) SECOND STATE OF CORPORATION (if known)
	of Corporation (if known) IALL
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
WELCH PLAZA INC	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co" or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word ."
B. Enter new principal office address, if applicable:	2655 EAST BAY DRIVE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	2655 EAST BAY DRIVE LARGO FL 33771
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3025 HOMESTEAD OAKS DRIVE
	3025 HOMESTEAD OAKS DRIVE CLEARWATER FL 33759
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	
(Florida s	street address)
Nava Banistana I Office Additional	, and the second
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the position.
Signature of Man	Registered Agent, if changing
	regisierea Agent, ij changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11	) (c), F.S.

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	
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
1) Change			
Add			
Remove			
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) he (Attach additional sheets, if necessary). (Be specific)	
HALED TATEDOENE HOBBALLAH	65%
HALED TATEDOENE HOBBALLAH	<i>35</i> %
If an amendment provides for an exchange, reclassification, or	or cancellation of issued shares,
provisions for implementing the amendment if not contained (if not applicable, indicate N/A)	u in the amendment itself:

•

The date of each amendment(s	s) adoption:	ARCH	15TH	2022		, if other than the
date this document was signed.		-	· · ·			, it office than the
Effective date if applicable:	APRIL 19	ST c	2022			
	(no	more tha	n 90 days afte	r amendment j	ile date)	
Note: If the date inserted in the document's effective date on the	is block does not m Department of Stat	eet the ap e's record	plicable statut s.	ory filing requ	uirements, this dat	e will not be listed as the
Adoption of Amendment(s)	(CHECI	K ONE)				
☐ The amendment(s) was/were action was not required.	adopted by the inco	rporators,	or board of di	rectors withou	t shareholder actic	on and shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the share e sufficient for appro	eholders. oval.	The number o	f votes cast fo	r the amendment(s	;)
☐ The amendment(s) was/were must be separately provided						ent
"The number of votes of	east for the amendme	ent(s) was	were sufficier	nt for approval		
by	(voting §					
	(voting g	group)				
Signature(By sele	a director, president ected, by an incorpor ointed fiduciary by t	ator – if ir	n the hands of			<u> </u>
	ALI	AJES	ed name of pe			
	(Тур	ed or print	ed name of pe	rson signing)		
	Dire	CTOR	<del>_</del>	· <u>-</u> .		
	(Title	of persor	i signing)			