(Requestor's Name)	
(Address)	10
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	1/30/13
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: M. N. KHI	MANI INC	
DOCUMENT NUMB	_{ER:} P120000552	250	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
ļ	MOHAMMAD A	A. KHIMANI	
<u>-</u> 	M. N. KHIMAN		n
<u>.</u>	3469 NW 110	Firm/ Company	
<u>.</u>	CORAL SPRIN		
	E-mail address: (to be us	ed for future annual report	
MOHAMMA	D A. KHIMANI	la ₍ 954	328-6847
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$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)
Amer Divis	ng Address Idment Section Idment Sec	Amend Divisio	Address Iment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

M. N. KHIMANI INC

(Name of Corporation as currently filed with the Florida Dept. of State)		
2000055250		
(Document Number of Corporation (if known)		
and to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following am	nen	

ndment(s) to

<u>V/A</u>				
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professi		
Enter new principal office address, Principal office address <u>MUST BE A S</u>		N/A		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		
		N/A		
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)			
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX) ad/or registered office ad	ldress in Florida, e	enter the nam	e of the
(Mailing address MAY BE A POST) If amending the registered agent an	OFFICE BOX) ad/or registered office ad	ldress in Florida, e	nter the nam	e of the
(Mailing address MAY BE A POST) If amending the registered agent an new registered agent and/or the new	od/or registered office act vegistered office address N/A	ldress in Florida, e	nter the nam	e of the
(Mailing address MAY BE A POST) If amending the registered agent an new registered agent and/or the new	ad/or registered office adwregistered office address N/A (Florida	ldress in Florida, e ess:	nter the nam	e of the

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	PT John I	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VPD	ZAREEN KHIMANI	3469 NW 110 TERR
X Add			CORAL SPRINGS, FL 33065
Remove			
2) Change		N/A	N/A
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			*************************************
6)Change			
Add	<u></u>		
Remove			

(Attach a	ding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
N/A	
·	
	·
	
	•
'. <u>If an an</u>	endment provides for an exchange, reclassification, or cancellation of issued shares, one for implementing the amendment if not contained in the amendment itself:
<u>provisi</u>	ons for implementing the amendment if not contained in the amendment itself: not applicable, indicate N/A)
(0)	но аррисаон, также пл)
N/A	

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-	

The date of each amendment(s) ad	option: JUN 28	0,2012
Effective date if applicable:	MA	
	(no more than 90 day	s after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sui		ber of votes cast for the amendment(s)
	roved by the shareholders through each voting group entitled to vote s	voting groups. The following statement separately on the amendment(s):
"The number of votes cast:	for the amendment(s) was/were suf	ficient for approval
by	NA	, 22
· · ·	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the incorporators without s	hareholder action and shareholder
Dated	07-20 /2	_
Signature	MAi	
(By a d	rector, president or other officer -	if directors or officers have not been
		ids of a receiver, trustee, or other court
appoint	ed fiduciary by that fiduciary)	
	MOHAMMED A	KHIMANI
	(Typed or printed name	e of person signing)
	PRESIDEN	T
	(Title of person sign	ing)