P/200008330/

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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C. LEWIS

JUL 22 2014

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: <u>AMEERA F</u> BER: <u>P1200008330</u>		<u>C.</u>			
The enclosed Articles	of Amendment and fee are sub	bmitted for filing.				
Please return all corres	spondence concerning this mat	ter to the following:				
TIM A. HAMED						
	Name of Contact Person TIM A. HAMED, CPA, P.A.					
		Firm/ Company				
	15310 AMBERLY	'DR., STE 250				
		Address				
	TAMPA, FL 3364	7				
		City/ State and Zip Code				
tim	hamed@yahoo.co	om				
		sed for future annual report	notification)			
	n concerning this matter, pleas		544 0005			
Tim A. Hamed, CPA		_{at (} 813	<u>, 514-2905</u>			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	or 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 & Centified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Centificate of Status Centified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building				

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

AMEERA FOODMART, INC.

14 JUL -7 AM 8: 33

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(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		_
P12000083301				
(Documer	nt Number of Corporation (if I	(nown)		-
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>F</i>	lorida Profit Corporation	adopts the following	ig amendment
A. If amending name, enter the new na	ame of the corporation:			
N/A				The new
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered." "professional associa	ation "Corp," "Inc," or "C	o". A professional corp	rporated" or the a oration name must	_ bbreviation =
• •		N/A		
B. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>	if applicable: TREET ADDRESS)			-
		11. 11.		-
				_
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		N/A		
				-
D. If amending the registered agent an	d/or registered affice addre	ex in Florida, antor the n	uma af tha	-
new registered agent and/or the new		ss in Fiorida, enter the fi	anc or the	
Name of New Registered Agent	N/A			
round by their registered rigers				
	(Florida stree	t address)	_	
New Registered Office Address:	N/A		1	
New Registered Office Address.	(City)	Florid	da(Zip Code)	•
New Registered Agent's Signature, if cl	nanging Registered Agent:	th and account the obligation	the position	
	eresi agenti. Transjamundi Mil	н ана ассерете отпуш	онь од те ромион.	
	TV D			
Nig	gnature of New Registered Ag	eni, iJ changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, n	ame, 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 Doc	
X Remove	V	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	VP	EID S. ALABED	10002 N. 30TH STREET
Add			TAMPA, FL 33612
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
[]			
6) L Change			
Add			
Remove			

A	ing additional Articl weets, if necessary).				
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	<u>royldes for an excha</u> dementing the amen	<u>nge, reclassifica</u> dment if not co	<u>ation, or cance</u> ntained in the	amendment itse	<u>a snares,</u> elf:
<u>lf an amendment p</u> provisions for inc	ble, indicate N/A)				
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provisions for imp (if not applicate					

The date of each amendment date this document was signed	(s) adoption: <u>JULY 01, 2014</u>	MILEU SECRETARY OF STATE DIVISION OF CORFORATIONS	, if other than the
Effective date <u>if applicable</u> :		14 JUL -7_AM 8: 33	
Effective date in applicable.	(no more than 90 c	days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/we by the shareholders was/w		number of votes cast for the amendment(s)	
	re approved by the shareholders through the each voting group entitled to vo	gh voting groups. The following statement te separately on the amendment(s):	
	s cast for the amendment(s) was/were	• •	
by	(voting group)	···	
	(voting group)		
The amendment(s) was/we action was not required.	re adopted by the board of directors w	ithout shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators withou	nt shareholder action and shareholder	
Dated_JUL	Y 01, 2014		
Signature Z	Hassan A.	ALL	
(I s	By a director, president or other officer	r – if directors or officers have not been hands of a receiver, trustee, or other court	
	HASSAN A. ALI		
	(Typed or pri	nted name of person signing)	
	PRESIDENT		
	(Title	of person signing)	