## P12000083584

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GECHE (MOSS)

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

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NAME OF CORPO	REGAL OF ORL	ANDO INC		
	IBER: P12000083584			
The enclosed Article	s of Amendment and fee are su	abmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	MURAD S MUMINOV			
		Name of Contact Person	1	
	REGAL OF ORLANDO IN	С		
		Firm/ Company		
	6707 TANGLEWOOD BAY	' DR APT 2312		
		Address	<del></del>	
	ORLANDO, FL 32821			
		City/ State and Zip Code	e	
	E-mail address: (to be u	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
MURAD S MUMIN	ov	at (	) de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	rtment of State:	
S35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILE 17 AUG 14 PH 1: 34

REGAL OF ORLANDO INC SECKE LAR 1 (Name of Corporation as currently filed with the Florida Dentlof State) P12000083584 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 11048 GRANDE PINES CIRCLE UNIT 921 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) ORLANDO, FL 32821 C. Enter new mailing address, if applicable: 11048 GRANDE PINES CIRCLE UNIT 921 (Mailing address MAY BE A POST OFFICE BOX) ORLANDO, FL 32821 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	HOLMIRZAYEVA, ZUKHRA	11048 GRANDE PINES CIRCLE
X Add			UNIT 921
Remove			ORLANDO, FL 32821
2) Change			
Add			
Remove			
3) Change			<del></del>
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>	<del>-</del>	
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<del></del>
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(3 , , , , , , , , , , , , , , , , ,	

The date of each amendment(s) adoption:date this document was signed.	AU 60	IST 12	\$	2017	, if other than the
Effective date <u>if applicable</u> :	<del></del>	<del></del>			
	(no more than 9	0 days after	amen	dment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of S		able statuto	ry filia	ng requirements, t	his date will not be listed as the
Adoption of Amendment(s) (CHF	ECK ONE)				
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for ap		number of v	otes (	east for the amendi	nent(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting g					
"The number of votes cast for the amend	lment(s) was/wer	e sufficient l	or app	proval	
by(votio				<u>.                                    </u>	
(voti)	ng group)				
☐ The amendment(s) was/were adopted by the b action was not required.	oard of directors	without shar	ehold	er action and share	:holder
The amendment(s) was/were adopted by the in action was not required.	icorporators with	out sharehol	der ac	tion and sharehold	ler
Dated AUGUST 8	2017				
Dated AUGUST &	- mu	d			
(By a director, presid	lent or other offic	er – if direct			
selected, by an incor appointed fiduciary l			receiv	er, trustee, or othe	r court
M	VRAD	MUMI	۸٥	<b>&gt;</b> ∨	
T)	yped or printed r	name of pers	on sig	ning)	
	PRES DE	JUT			
		of person sig	ning)		