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COVER LETTER

TO: Amendment Section Division of Corporations

DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROBERT W. KIDD, CPA Name of Contact Person SEABREEZE BOOKKEEPING & TAX SERVICE, LLC	_
Please return all correspondence concerning this matter to the following: ROBERT W. KIDD, CPA Name of Contact Person	
ROBERT W. KIDD, CPA Name of Contact Person	
Name of Contact Person	
SEABREEZE BOOKKEEPING & TAX SERVICE, LLC	
Firm/ Company	
682 S. YONGE ST.	
Address	
ORMOND BEACH, FL 32174	
City/ State and Zip Code	
STACY.SBTS@CFL.RRCOM	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
ROBERT W. KIDD, CPA 386 672-6999	
Name of Contact Person Area Code & Daytime Telephone N	lumber
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee & Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to

FILED

	Articles of Inc	•	17 NOV 17 PH 1: 25
	EL-GHALY GROUP, INC.		SECHETALY OF TALE
(Name	of Corporation as current	ly filed with the Flo	rida Dept. of State) 11 11 1100
	P120000	86389	
	(Document Number o	f Corporation (if kno	own)
dursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corp	oration adopts the following amendment(s)
. If amending name, enter the new na	ame of the corporation:		
ν/Λ			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp." "Inc." or "	Co". A professione	
 Enter new principal office address, Principal office address <u>MUST BE A S</u> 			
Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)		N/A	
 If amending the registered agent an new registered agent and/or the new 			er the name of the
	N/A	<u></u>	
Name of New Registered Agent			
	·	vet address)	
New Registered Office Address:	N/A		Florida
		(City)	(Zip Code)
lew Registered Agent's Signature, if c	hanging Registered Agent	<u>:</u>	
hereby accept the appointment as regist			obligations of the position.
	Signature of New R	Registered Agent, if c	hanging

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: <u>X</u> 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)	Title	Name	Address
1) Change	P	JOSEPH KMAID	214 VERMONT AVE.
X Add			DAYTONA BEACH, FL 32118
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)
\$/A	
10 1. 11.	
	
	
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	nument if not contained in the amendment tisen.
/Α	
/A	
/A	
/A	
/A	
/A	
//\	
/A	
!/A	
//A	
1/A	

	11/14/17	
The date of each amendment(s) ac	loption:	, if other than the
date this document was signed		
	11/14/17	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amend fficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendments	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	pted by the board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	der
Dated//.	15.2017	
✓ Signature——	202	
(By a di selected	irector, president or other officer – if directors or officers have not it, by an incorporator – if in the hands of a receiver, trustee, or othe ed fiduciary by that fiduciary)	
	JOSEPH KMAID	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	