## P13000044153

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PICK-UP WAIT	MAIL
(Business Entity Name)	<del>                                     </del>
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## COVER LETTER

TO: Amendment Section Division of Corporations	+ mae Enterprises corp
NAME OF CORPORATION: AASET MAE	ENTERPRISES CORP
DOCUMENT NUMBER: P3000044753	P13000044753
The enclosed Articles of Amendment and fee a	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
MAYIDA LUTFI	
	Name of Contact Person
	Firm/ Company
4437 HAYLOCK DR	Thus Company
<del></del>	Address
ORLANDO FL 32807	
	City/ State and Zip Code
gigiandrea2010@gmail.com	
E-mail address: (to	be used for future annual report notification)
For further information concerning this matter,	please call:
MAYIDA LÜTFI	at (407 ) 9821861
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	  ade payable to the Florida Department of State: 
S35 Filing Fcc	
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



ASSET MAE ENTERPRISES CORP

	II		
(Name of Co	rporation as currently	filed with the Florida Dept. of State)	
ASSET MAE ENTERPRISES CORP	1 PI300	00044753	
	(Document Number of C	Corporation (if known)	<del></del>
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:		orida Profit Corporation adopts the following ar	nendment(s) to
A. If amending name, enter the new name of	hthe corporation:		
		Th	e new
	Corp," "Inc," or "Co	" "company," or "incorporated" or the abbroo". A professional corporation name must con	eviation
B. Enter new principal office address, if ap	 nlicable:	2605 CURRY FORD RD	
(Principal office address <u>MUST BE A STRE</u>	T ADDRESS )	ORLANDO FL 32806	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		2605 CURRY FORD RD	
		ORLANDO FL 32806	
D. If amending the registered agent and/or new registered agent and/or the new reg		ss in Florida, enter the name of the	
Name of Nam Barriage I America			
Name of New Registered Agent			
	(Florida stree	( address)	
New Registered Office Address:		, Florida	<del></del>
		(Zip Code	e)
New Registered Agent's Signature, if chang	ing Registered Agent:		
hereby accept the appointment as registered		th and accept the obligations of the position.	
<del></del>		ristered Agent, if changing	
	angination of their rice	and the region, if thinking	
	11		

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice H Executive Officer; CFO = held. President, Treasurer Changes should be noted a change, Mike Jones leav Mike Jones, V as Remove,	ind/or Differession title President, Chief F Chief F Director in the follows the co	irector being ary)     2 by the first   2 T = Treasur inancial Offi r would be P lowing manu orporation, S	added:  letter of the office title:  let; S= Secretary; D= Director; TR= Tr  let; S= Secretary; S= Secreta	director being removed and title, name, and custee: C = Chairman or Clerk: CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is thould be noted as John Doe, PT as a Change,
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)	Title	Na Na	<u>me</u>	<u>Addres</u> s
1) Change		- <del> </del>		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		- <del>-</del>		<del></del>
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		- <del></del>	 	
Add				
Remove				
6) Change				
Add				

Remove

E. If amending or adding additional Articles	enter change(s) here:
(Attach additional sheets, if necessary). (B	e specific)
	,
F. If an amendment provides for an exchang	, reclassification, or cancellation of issued shares,
provisions for implementing the amendm	ent if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<del></del>	<u> </u>
	<u>li</u>

The date of each amendment(s) adoption: _ date this document was signed.	if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed as the fister's records.
Adoption of Amendment(s) (C	HECK ONE)
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin	he shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes cast for the am	 endment(s) was/were sufficient for approval
by	
(v	oting group)
☐ The amendment(s) was/were adopted by th action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators without shareholder action and shareholder
Dated 917/1	<del>                                     </del>
Signature Marji	da Sutfi
(By a director, pre	esident or other officer - if directors or officers have not been
	corporator – if in the hands of a receiver, trustee, or other court ry by that fiduciary)
	MAYIDA LUTF
	(Typed or printed name of person signing)
	PRESCIDENT
	(Title of person signing)