## P1300045622

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## **COVER LETTER**

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Tallahassee, FL 32301

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**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: ZSF INTERNATI	ONAL INC	<del></del>
DOCUMENT NUM	P13000045622		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	NAQI NAQVI		
		Name of Contact Person	n
		Firm/ Company	
	3780 92ND LANE NORTH		
	WEST PALM BEACH FL 3	Address 3403	
		City/ State and Zip Cod	e
ZSFI	NTERNATIONAL@GMAIL	COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
NAQI NAQVI		at (	452-1861
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA

15 JUL -7 PM 2:31

ZSF INTERNATIONAL INC	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P13000045622	
(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co" or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<ol> <li>If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres</li> </ol>	ress in Florida, enter the name of the s:
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	t:
hereby accept the appointment as registered agent. I am familiar	
	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>	<u>Addres</u> s
1) Change	VP	SAJID ABDUL GHAFOOR	8610 NW 16 STREET
X Add			PEMBROKE PINES FL 33024
Remove			
2) Change			
Add			
Remove			LAH LAH
3) Change			A S S S
Add			
Remove			2: 0R
4) Change			3 DF
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
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f an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,	?: 3	ORI
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not contained in the amendment itself:	_	D.c.
(y noi applicable, maicate (WA)			
		<del></del>	
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	_, if other than the
date this document was signed.  MAY 15, 2015  Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	7.0
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	SECRET ALLAH
Dated	FILEC ARY O ASSEE
1 1 1 Mar 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	P THO
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	STATE LORIDA 2: 31
NAQI NAQVI	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

1.15.2