P13000049302

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



400258809944

04/18/14--01006--010 **35.00

16 PER 18 PH 8: 38

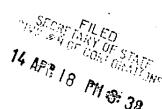
Amend 10 4,24,14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: R&N Mini	Market, Inc.	
DOCUMENT NUMBER: P130000493		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this r	matter to the following:	
Candy Brownlov	W	
	Name of Contact Person	1
John P. Maas		
	Firm/ Company	
44 N.E. 16 Stree	et	
-	Address	
Homestead, FL	33030	
	City/ State and Zip Code	2
alamsadib@gmail.d	com	
	used for future annual report	notification)
For further information concerning this matter, ple	ease call:	
Candy Brownlow	at (305	, 247-7132
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Depa	ertment of State:
■ \$35 Filing Fee		☐\$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	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle

Articles of Amendment to Articles of Incorporation of



R&N Mini Market, Inc.	" 3 ₉
(Name of Corporation as currently filed with the Florida Dept. of State)	
P13000049302	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts	the following amendme

ent(s) to

N/A				The n
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc,"	or "Co". A professiona	"incorporated" or the ab al corporation name must c	breviati
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable:	N/A		
	anhla.			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST) D. If amending the registered agent an new registered agent and/or the new	OFFICE BOX) d/or registered office :	address in Florida, ente	r the name of the	
(Mailing address <u>MAY BE A POST</u> of the land of the la	OFFICE BOX) d/or registered office :	address in Florida, ente	r the name of the	
(Mailing address MAY BE A POST of the new registered agent and/or the new	d/or registered office a vegistered of fice add	address in Florida, ente ress:	r the name of the	
(Mailing address MAY BE A POST of the new registered agent and/or the new	d/or registered office a vegistered of fice add	address in Florida, ente	r the name of the	

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	2	
X Remove	<u>V</u>	Mike Jor	nes es	
X Add	<u>sv</u>	Sally Sm		
Type of Action (Check One)	<u>Title</u>		<u>Name</u> .	<u>Addres</u> s
1) Change	S/T		Fatima A. Kabir	2867 N.E. 4 Street
Add		- "		Homestead, FL 33030
Remove				•
2) Change				
Add	-	_		
Remove				
3) Change				All the state of t
Add			 	
Remove				
4) Change		_		•
Add				
Remove				
5) Change	· · · · ·	_		
Add				
Remove				
6) Change				
Add				
Remove				

E. If ame	<mark>ending or adding addition</mark> h <i>additional sheets, if neces.</i>	Articles, enter ch	ange(s) here:		
	n aaantonat sneets, 11 neces.	ыну). (ве ѕресіліс	,		
N/A					
	· · ·				
					
					
		 			
					
. <u>lf an</u>	amendment provides for a	n exchange, reclass	ification, or cancel	llation of issued sha	res,
prov	isions for implementing th (if not applicable, indicate I	e amendment if not	contained in the a	mendment itself:	
N/A	у погаррисавіе, іпаісаіе і	//A)			
					
					

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	s)
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):	ent
"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 sharehold action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
DatedApril 16, 2014	
Takel Jur	
Signature (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 cou appointed fiduciary by that fiduciary)	rt
Muhammad J. Hossain	
(Typed or printed name of person signing)	
President	
(Title of person signing)	