## 91300068498

(Re	questor's Name)	
	dress)	
(Au	uressy	
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(Cit	y/State/Zip/Phone	#)
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(Do	ocument Number)	
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John

## **COVER LETTER**

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**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Rami & Rana Inc				
DOCUMENT NUM	BER: P13000068498				
	s of Amendment and fee are su	abmitted for filing.			
Please return all corre	espondence concerning this ma	itter to the following:			
	Jennifer Briggs				
		Name of Contact Person	1		
	Sentinel CFO Sources LLC				
		Firm/ Company	·		
	PO Box 555				
		Address			
	Odessa/FL/33558				
		City/ State and Zip Cod	2		
jenn	ifer@cfosources.com		,		
<u></u> .		sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Rami Ibrahim		at (850	_) 281-2546		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	ertment 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

Rami & Rana Inc.	
(Name of Corporation as currently filed with the Flori	da Dept. of State)
P13000068498	
(Document Number of Corporation (if know	n)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpor</i> its Articles of Incorporation:	vation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or " "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional word "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable:	, <u></u>
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
<del></del>	
	15% 22
C. F. Andrews and the condense of applicables	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
D. If amending the registered agent and/or registered office address in Florida, enter new registered agent and/or the new registered office address:	the name of the
Name of New Registered Agent	<del></del>
(Florida street address)	
New Registered Office Address:	. Florida
(City)	Florida

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 Do	<u>)e</u>	
X Remove	<u>V</u>	Miķe Jo	ones .	
X Add	<u>SV</u>	Sally St	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	VP		Mikhail Patel	14710 Innerarity Point Rd
Add				Pensacola, FL 32507
X Remove				
2) Change		<del></del>		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:						
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provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	f an amendment provides for an exch	ange, reclassificat	ion, or cancel	lation of issue	d shares,	
(if not applicable, indicate N/A)	provisions for implementing the amer	ndment if not cont	ained in the a	mendment its	<u>elf:</u>	
	(if not applicable, indicate N/A)					
				<u>-</u>		
			<del></del>			
		·				
					<u></u>	

The date of each amendment(s) adoption this document was signed.	otion:, if other than
Effective date if applicable:	
	(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this blocdocument's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will not be listed as rtment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	ved by the shareholders through voting groups. The following statement ch 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)
	(voting group)
☐ The amendment(s) was/were adopte action was not required.	ed by the board of directors without shareholder action and shareholder
■ The amendment(s) was/were adopte action was not required.	ed by the incorporators without shareholder action and shareholder
Dated 6 - 19	9-2018
Signature	
selected, t	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
Ra	ımi İbrahim
	(Typed or printed name of person signing)
Pr:	esident Dianis Iland.
	(Title of person signing)

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