P13000097403

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2027 SEP 28 PM 1: 08

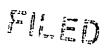
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: GHALL REALTY	, INC			
	BER: P13000097403				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	LOUISA GHALI				
		Name of Contact Person	····		
	GHALI REALTY INC				
		Firm/ Company			
2000 FALCON TRACE BLVD SUITE # 148					
	Address				
	ORLANDO, FL 32837				
		City/ State and Zip Code			
	ENSD2000@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	407	722-9299		
Name of Contact Person		at (at Cod	_) le & Daytime Telephone Number		
	or the following amount made		, .		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



GHALI REALTY INC				2022 SEP 20	Du
(Name of Corporation	n as currently	filed with the Flori	la Dept. of Sta	2022 SEP 28	PM 1:08
P13000097403				TALE, TALE YUNG	96
(Docum	ent Number of C	Corporation (if know	n)		VELL TE
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this FI	orida Profit Corpor	ation adopts the	following amen	dment(s) to
A. If amending name, enter the new name of the con	rporation:				
	<u>_</u>			The	new
name must be distinguishable and contain the word "con "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrey	or "Co". A i	npany," or "incorpo professional corport	orated" or the al ation name mu	bbreviation "Cor st contain the w	p.," vord
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u>	RESS)		_	_	_
					_
				<u> </u>	_
C. Enter new mailing address, if applicable:					
(Muiling address MAY BE A POST OFFICE BOX	9			-	-
	-		-		_
					_
). If amending the registered agent and/or registere	ed office addres	s in Florida, enter t	he name of the	<u> </u>	
new registered agent and/or the new registered o	ffice address:				
Name of New Registered Agent					
	(Florida street	address)			
New Registered Office Address:			, Florida		
	(Ci	(y)	- 	(Zîp Code)	-
New Registered Agent's Signature, if changing Regis	tered Agent:				
hereby accept the appointment as registered agent. I	am familiar with	and accept the obli	gations of the p	osition.	
Signate	ure of New Regi.	stered Agent, if chan	ging		
Check if applicable					

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Remove

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.

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	TAMER KOLTA	14649 POTANOW TRAIL
X Add			ORLANDO, FL 32837
Remove			***
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<u></u>

E. If amending or adding additional Articles, enter change(s) here: '(Attach additional sheets, if necessary). (Be specific) LOUISA GHALI 50 SHARES	
TAMER KOLTA 60 SHARES	
· · · · · · · · · · · · · · · · · · ·	
F. 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)	

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	09/22/22		
The date of each amendment(s) ad date this document was signed.		, if ot	ther than
09/23 Effective date <u>if applicable</u> :	2/22		
effective date if applicable.	(no more than 90 days after amendment file date)		
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will partment of State's records.	I not be	listed as
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and	i shareho	older
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.		
	roved by the shareholders through voting groups. The following statement	2022 SEP	
"The number of votes east	for the amendment(s) was/were sufficient for approval (voting group)	28	Li exen
by	(voting group)	PH 1: 08	
	(voting group)		تويي
	<u>_</u> 2.	 C	
09/22/22	•	ထ	
Dated			
Signature LTOU	ti 5a chou		
(By a di selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)		
•••	LOUISA GHALI		
	(Typed or printed name of person signing)		
	(Title of person signing)		
	Z K		

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