P1400016825

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OCT 23 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: M & M BANGAL	I INC .	
DOCUMENT NUM	BER: P14000016825		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	*
	APRIL CONDRON	* * 9	
		Name of Contact Person	n · ,
	CAPE COD MGMT SVC IN	C	
		Firm/ Company	
	314 NE 27TH ST		
		Address	***************************************
	WILTONMANORS FL 3333	34	
	-	City/ State and Zip Cod	e
APR	ILPEACH1@AOL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	630-8300
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
	or the following amount made		
\$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.C	iling Address endment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

M & M BANGALI INC

(Name of Corporation as currently	y filed with the Florida Dept. of State)		
P14000016825		弄 点	2010	
(Document Number of	Corporation (if known)	17-	130	,
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing a		ent(s
A. If amending name, enter the new name of the corporation:			ii N he∷nev	
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			
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address				
Name of New Registered Agent				
(Florida str	eet address)	<u>.</u>		
New Registered Office Address:	, Florida_			
- "	(City)	(Zip Cod	łe)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		sition.		
Signature of New R	egistered 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	o <u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	VP	_	MOHAMMED M ALAM	12345 NW 1ST ST
Add				PLANTATION FL 33325
X Remove				
2) Change		<u> </u>		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
· · · · · · · · · · · · · · · · · · ·			
			<u> </u>
	<u> </u>		
			<u></u>

f an amendment provides for an exch	ange, reclassification, or ca	ncellation of issued share:	3.
provisions for implementing the ame	adment if not contained in	the amendment itself:	_
(if not applicable, indicate N/A)			
		· · · · · · · · · · · · · · · · · · ·	
			<u>.</u>

war end a	10/19/2015		
The date of each amendment(s) a date this document was signed.	doption:		, if other than the
•			
Effective date if applicable:		s after amendment file date)	
	(no more than 90 day	s after amendment file date)	
Note: If the date inserted in this document's effective date on the D		statutory filing requirements, this date wi	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
■ The amendment(s) was/were ad by the shareholders was/were s		ber of votes cast for the amendment(s)	
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through vereach voting group entitled to vote s	voting groups. The following statement eparately on the amendment(s):	
	for the amendment(s) was/were suff		
by	(voting group)	,,,	
	(voting group)		
		out shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without sh	nareholder action and shareholder	
Dated /	10-19-15 m		
1		•	
Signature /			
(B) a c	lirector, president or other officer - i	f directors or officers have not been	
	d, by an incorporator – if in the hand ited fiduciary by that fiduciary)	ls of a receiver, trustee, or other court	
αρροπ	ted fiduciary by mat fiduciary)		
	MOHAMMED M ALAM		
	(Typed or printed name	of person signing)	
	VP		
	(Title of pers	son signing)	