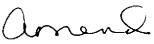
## P14 0000 25740

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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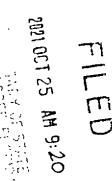
Office Use Only



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A. RAMSEY NOV 0 4 2021

## COVER LETTER

TO: Amendment Section

Division of Corporations	• •				
NAME OF CORPORATION: DEMASHQE	E INC				
DOCUMENT NUMBER: P14000025740					
	<del></del>				
The enclosed Articles of Amendment and fee a	are submitted for filing.				
Please return all correspondence concerning th	is matter to the following:				
AMON HAWIJA					
	Name of Contact Person				
DEMASHQEE INC					
	Firm/ Company				
3921 10TH AVE N					
	Address				
LAKE WORTH FLORIDA 33461					
	City/ State and Zip Code				
FAJITASMARKET@G	MAIL.COM				
E-mail address: (to	be used for future annual report notification)				
	-1				
For further information concerning this matter,	picase can.				
AMON HAWIJA	at (561) 410-8163				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:				
☐ \$35 Filing Fee ☐\$43.75 Filing Fee Certificate of State					
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

FILED 2021 OCT 25 AM 9: 20

Check if applicable

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

DEMASHQEE INC			War Thay of sta	T.E.
(Name	of Corporation as currently	filed with the Flo	rida Dept. of State)	1.
P14000025740				
	(Document Number of	Corporation (if kno	own)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	Torida Profit Corp	oration adopts the following	g amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,"	Corp." "Inc." or "Co". A			
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>			<del></del>	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
D. If amending the registered agent an new registered agent and/or the ne		ess in Florida, ente	er the name of the	
Name of New Registered Agent	AMON HAWIJA			
	(Florida stree	et address)	-	
New Registered Office Address:	3921 TOTH AVE N LAKE	WORTH	, Florida	
	10	City)	(Zip C	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		th and accept the o	ohligations of the position.	
	Signature of New Reg	zistered Agent, if c	hanging	

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 PTJohn Doe X Remove $\underline{\mathbf{y}}$ Mike Jones <u>X</u> Add SV Sally Smith Type of Action <u>Title</u> Address <u>Name</u> (Check One) Mcdawn, Alexander 3921 10TH AVE N TR 1) \_\_\_\_ Change LAKE WORTH \_\_\_\_ Add FL 33461 Remove 2) Change \_\_\_\_ Add \_ Remove Change \_\_\_\_ Add \_\_ Remove 4) \_\_\_\_ Change \_\_\_\_ Add Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove 6) \_\_\_\_ Change \_\_\_ Add Remove

	(Be specific)
	1.1.21
<u> </u>	
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an indicate in the amendment itself:
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•	10/19/2021	
The date of each amendment(s) adoption	n:	, if other than the
date this document was signed.		
10/19/202	l .	
Effective date if applicable:	1 00 1 0	24 1 . )
	(no more than 90 days after amendme	ent file date)
<b>Note:</b> If the date inserted in this block of document's effective date on the Department		requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	by the incorporators, or board of directors with	hout shareholder action and shareholder
☐ The amendment(s) was/were adopted to by the shareholders was/were sufficient	by the shareholders. The number of votes cas nt for approval.	t for the amendment(s)
	by the shareholders through voting groups. So	•
"The number of votes cast for the	e amendment(s) was/were sufficient for appro	oval
by		
· · · · · · · · · · · · · · · · · · ·	(voting group)	<del></del> '
	1 11	
Dated <i>[17 ~ 1 9 -</i>	KOKI	
Signature	Aman	
(By a director	, president or other officer - if directors or of	
	n incorporator - if in the hands of a receiver,	trustee, or other court
appointed fid	uciary by that fiduciary)	
AMO	N HAWIJA	
	(Typed or printed name of person signing	og)
PRES	IDENT	

(Title of person signing)