P14000029711

(R	equestor's Name)		
(A	ddress)		
(A	ddress)		
(C	ity/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL	
(B	usiness Entity Name)		
(Document Number)			
Certified Copies	Certificates of State	us	
Special Instructions to	o Filing Officer:		
	·		





400281624654

02/03/16--01030--020 **35.00

2016 FEB -8 AM 10: 38

FEB 1 0 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of	Corporations		
NAME OF CO	RPORATION: LJ MISS, II	NC.	
DOCUMENT N	NUMBER: P1400002971	1	
The enclosed Ar	ticles of Amendment and fee are su	bmitted for filing.	
Please return all	correspondence concerning this ma	itter to the following:	
	TIM A. HAMED,	CPA	
		Name of Contact Persor	1
	TIM A. HAMED,	CPA, P.A.	
		Firm/ Company	
	15310 AMBERL)	7 DR., STE 250	
		Address	
	TAMPA, FL 3364		
		City/ State and Zip Code	2
	timhamed@yahoo.co	om	
		sed for future annual report	notification)
	1.7 p		
For further infor	mation concerning this matter, pleas	se call:	•
TIM A. HA	AMED, CPA	_{at (} 813	514-2905
7	Name of Contact Person		de & Daytime Telephone Number
Enclosed is a ch	eck for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing F	Tee □\$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		Address
	Amendment Section		Iment Section
	Division of Corporations P.O. Box 6327		on of Corporations Building
	Tallahassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LJ MISS, INC.		
(Name of Corporation as currently filed with the F	lorida Dept. of State)	<u></u>
P14000029711		
(Document Number of Corporation (il	f known)	_
Pursuant to the provisions of section 607.1006. Florida Statutes, this a its Articles of Incorporation:	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the corporation:		
N/A		The new
name must be distinguishable and contain the word "corporation" Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "oword "chartered." "professional association." or the abbreviation."	Co". A professional corporation name musi	
B. Enter new principal office address, if applicable:	N/A	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		- 12 S
		- 581 - 881
		- (A)
C. Enter new mailing address, if applicable:	N/A	ST 60 1
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		AH 10: 38
		38
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		_
TIM A HAMED		
Name of New Registerett Agent	Y DR., STE 250	
(Florida stre		
New Registered Office Address: TAMPA	. Florida 33647	
(City)		
Nam Darland Amerika Stranger (California Darland Amerika		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent, I am familiar w	<u>t</u> with and accept the obligations of t he position .	
Tim Lymn I	-	
	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 <math>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 Doc	
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>Address</u>
1) Change	VP	MUNTASIR AWADALLAH	2815 E. SLIGH AVE
Add			TAMPA, FL 33610
Remove			
			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(in market of the occurrent is to	(Be specific)
/A	
·	
· · · · · · · · · · · · · · · · · · ·	
··	
	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
• • • • • • • • • • • • • • • • • • • •	
• • • • • • • • • • • • • • • • • • • •	
• • • • • • • • • • • • • • • • • • • •	
(If not approache, marcale (1721)	

The date of each amendment(s) adopt	ion:'	, if other than the
date this document was signed.		
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 was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for t	he amendment(s) was/were sufficient for approval	
by		•
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated 02/05/2016		
Signature 2	in And Ill	
(By a direct selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)	
Lin	A AWADALLAH	
	(Typed or printed name of person signing)	
PR	ESIDENT	
	(Title of person signing)	