## P14000050473

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SECRETALY OF STATE TALLAHASSEE, FL

JUL - 1 2019 C Kinsey

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	: SMH INVESTME	ENT CORPORATION			
DOCUMENT NUMBER:	P14000050473				
The enclosed Articles of Amen	dment and fee are su	bmitted for filing.			
Please return all correspondenc	e concerning this mat	tter to the following:			
HU	SSEIN, DONYA K				
		Name of Contact Pe	rson		
SMH	SMH INVESTMENT CORPORATION				
<del></del> .	Firm/ Company				
480	CALHOUN RD				
	•	Address			
PLAN	T CITY, FL 33567				
		City/ State and Zip C	Code		
donya	01@sbcglobai.net				
E-m	ail address: (to be use	ed for future annual rep	ort notification)		
For further information concern DONYA K HUSSEIN	ing this matter, please	813	585-0566		
Name of Contact Person		at ( Area	Code & Daytime Telephone Number		
Enclosed is a check for the follo					
	3.75 Filing Fee & rtificate 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 Addi Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations	Ame Divi Clift 266	et Address endment Section sion of Corporations on Building I Executive Center Circle ahassee, FL 32301		

## **Articles of Amendment**

## Articles of Incorporation of

	14 Investmo	M COrpointion		
(Name	of Corporation as currently t	filed with the Florida Dept. of S	State)	
	D140	XXXX 50473		
	(Document Number of C			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this Fl	orida Profit Corporation adopts	the following amen	idment(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associated and control of the co	nation "Corp," "Inc," or "Co	". A professional corporation	l" or the abbrevio name must contain	ition i the
B. Enter new principal office address,		<del></del>	<del>_</del>	
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		N	
C. Enter new mailing address, if applicable:			ECHLIANT	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		AM II: 39	m O
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the name of	• • • •	
	SAZAR AMIR POWERS			
Nume of New Registered Agent	3541 HAYSTACK RD	<del></del>		
	(Florida street	address)		
New Registered Office Address:	WESLEY CHAPEL FL	, Flor	33543 ida	
	(Ci	ity)	(Zip Code)	_
New Registered Agent's Signature, if c I hereby accept the appointment as regist		h and accept the obligations of the	1e position.	
	/ Signature of New Regi	stered Agent if changing	_ · <del></del>	

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 Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	P	DONYA K HUSSEIN	4801 CALHOUN RD	
Add			PLANT CITY FL 33567	
X Remove				
2) Change	P	SAZAN AMIR POWERS	3541 HAYSTACK RD	
X Add			WESLEY CHAPEL FL 33543	
Remove				
3 ) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)		
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an amendment provides for an excl	nange, reclassification, or ca	ncellation of issued shares.	
rovisions for implementing the amo	ndment if not contained in	he amendment itself:	
(if not applicable, indicate N/A)			
		<del>-</del>	
· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	,
Effective date if applicable:	
(no more than 90 da	ys after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were sur	ficient for approval
by(voting group)	
The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without saction was not required.	hareholder action and shareholder
Dated	- L
(By a director, president or other officer -	
selected, by an incorporator – if in the han appointed fiduciary by that fiduciary)	ds of a receiver, trustee, or other court
SAZAR AMIR POWERS	
(Typed or printed name	of person signing)
PRESIDENT	
(Title of pe	rson signing)