P14000050473

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certificates of Sta	tus
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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: SMH investment Corporation P1400050473 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DONYA HUSSEIN Name of Contact Person Firm/ Company Address 100165BcgloBel, Ne For further information concerning this matter, please call: HUSSein at (813), 585-0566

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

ef l

(Name of Corporation as currently filed with the Florida Dept. of State	<u>lon</u>		
DALLOND FOLLTO	,		
(Document Number of Corporation (if known)		_	
Pursuant to the provisions of section 607,1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the fits Articles of Incorporation:	ollowing	gameno	lment(s) to
A. If amending name, enter the new name of the corporation: SMH INVESTMENTS CORP name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the able "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must "chartered," "professional association," or the abbreviation "P.A."	breviatio	_The i n "Cor _i t the w	p., "
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)	SE VER	20 FEB -	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:	To The Table		
Name of New Registered Agent		ယ _ e 1	
<u> </u>	0	_	
(Florida street address)			
New Registered Office Address:	(Zip (Codes	_
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the p	·	_	
Signature of New Registered Agent, if changing		_	
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)

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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			0.1
Add			<u> </u>
Remove			101 5 0
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:		
(Attach additional sheets, if necessary). (Be specific)		
		
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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)		-
(if not applicable, matche 1974)	25 5	•
	<u>ن شین</u>	ა 1 —
	(D)	•
	<u> </u>	

The date of each amendment(s) adoption: 62-04-2020 if other than the date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
Note : If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
Signature (By a directof-president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)
(Title of person signing)