## P14000051739

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DIVISION OF CERT STATE

AUG 19 2015

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## **COVER LETTER**

MARRAKESH HOOKAH Lounge INC 014000051739 NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANNAS CHNINAK MARRAKESH HOOKAH lounge INC Firm/ Company 5/92 West IRLo Bronson Nemonial Hung Address For further information concerning this matter, please call: at (407) 715 85 9 8.

Area Code & Daytime Telephone Number ANNAS CHNINAK
Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee ■ \$35 Filing Fee **□**\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section Division of Corporations

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment**

to

## **Articles of Incorporation**

of

MAKKAKESH HOOKI	H Counge, INC.		
(Name of Corporation as currently	filed with the Fforida Dept. of State)		
(Document Number of Corporation (if known)			
/ (Document Number of C	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
	The new		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered." "professional association." or the abbreviation "F	Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	2017 S		
(Principal office address MUST BE A STREET ADDRESS)	- Grand Carl		
C. Francisco malling address if soulisables			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
	<b>10</b>		
	A		
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the		
new registered agent and/or the new registered office address:	AboleLtatur		
Name of New Registered Agent Abacha tah	EL Mouhtadi El Mouhta		
2 21 2 11 2	Captle DR		
304\ Seaville (Florida stree			
	0.71.6		
New Registered Office Address: Kissimm	<u><b>C</b>try)</u> , Florida <u>34 146</u> (Ztp Code)		
·			
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.		
A			
( Alm.)	11		
Signature of New Re	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: XChange	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change	VP MOHAMAD ELJISHY	5338 Porarlise car
Add Remove	·	KissiMNEFFL 34746
2) X Change	VP FROM MOHAMAD EL JISHI TO	
Add Remove	Abdeffatah elmouhtadi	
3) Change Add	AbdelFortah .	3091 Scalliew Costle DR Kissimmee, FL 34746
Remove	EL mountadi	
4) Change		VI.
Add Remove		
5) Change		
Add		- Washington
Remove		
6) Change		
Add		
Remove		

f amending or adding additional Arti Attach additional sheets.' if necessary).	(Be specific)	
	· · · · · · · · · · · · · · · · · · ·	
		<del> </del>
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	

The date of each amendment(s) adoption: \( \begin{aligned} \delta & \cdot \delta \end{aligned} \)  that this document was signed.	, if other than the
Effective date if applicable: 08 - 0/ _ 15	
(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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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"  (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 08-01-15	
Signature (By a director, 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)	
ANNAS CHNINAK	
(Typed or printed name of person signing)	
(Title of person signing)	