Plyaasbob3

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000262892230

08/04/14--01010--007 **35.00

And

AUG 13 2014

R: WHITE

COVER LETTER

Division of Corporations NAME OF CORPORATION: FIRST CHOICE 2 INC. DOCUMENT NUMBER: P14000056063 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: FADY HANNA Name of Contact Person Firm/ Company 9055 STARKEY ROAD LARGO, FL 33777 City/ State and Zip Code HANNA FADY05@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (727) 420-1133

Area Code & Daytime Telephone Number **FADY HANNA** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

S35 Filing Fee

TO: Amendment Section

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

□\$43.75 Filing Fee &

Certificate of Status

Street Address

□\$43.75 Filing Fee &

(Additional copy is enclosed)

Certified Copy

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

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

Articles of Amendment to Articles of Incorporation

	-	•		
$\gamma I_{\rm v}$	1. 12		: 1	1

	s currently filed with the Florida Dept. (of State)
P14000056063		
	nt Number of Corporation (if known)	
ursuant to the provisions of section 607 s Articles of Incorporation:	.1006, Florida Statutes, this <i>Florida Profit</i>	t Corporation adopts the following amendment
. If amending name, enter the new n	ame of the corporation:	
		The new
ame must be distinguishable and con Corp., " "Inc.," or Co.," or the design ord "chartered," "professional associo	nation "Corp." "Inc." or "Co". A profe	v," or "incorporated" or the abbreviation essional corporation name must contain the
. Enter new principal office address, Principal office address <u>MUST BE A S</u>		
Enter new mailing address, if appl		
(Multing undress MAI DE A FODI	OFFICE BOX	
. If amonding the registered agent a	nd/or registered office address in Florida	a enter the name of the
new registered agent and/or the ne	w registered office address:	4 013-23-23-31-413-31-413-
Name of New Registered Agent	LENA AYOUB, ESQ.,	
	1221 TURNER STREET, SUIT	E 102
	(Florida street address)	
	CLEARWATER	, Florida 33756
New Revistered Office Address:		

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 De	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	Title		Name	Address
1) Change	VPD		AMIN HANNA	9055 STARKEY ROAD
Add		_		LARGO, FL 33777
Remove				
2) Change		_		
Add				
Remove				
3) Change	 ,			
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		···-		
Remove				
6) Change		_		
Add				
Remove				

itach <i>additional</i>	dding additional A I sheets, if necessary)). (Be specific)			
		<u> </u>			
					· · · · ·
<u> </u>					
					
		"		<u> </u>	
	_		,		
		<u>-</u>			
				 -	
					<u></u>
	 -				
rovisions for it	t provides for an exmeplementing the aucable, indicate N/A)	mendment if not c	ication, or cance contained in the	llation of issued sh amendment itself:	ares,
· · · · · · · · · · · · · · · · · · ·					
					<u> </u>
				······································	

The date of each amendment(s) as	loption:	, if other than th
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 add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	,
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 7	17-14	
Signature		
(By a d	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	_
	FADY HANNA	
	(Typed or printed name of person signing)	
	(Title of person signing)	_