## PN 6000 72131

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	#)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to	Filing Officer:				
•					





300283918913

03/29/16--01017--004 \*\*35.00

2016 HAR 29 AM 7: 27

SECRETARY OF STATE

THE A MARCHE FOR INSTA

APR 0 4 2016 C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	14000072131 P14000072131				
DOCUMENT NUMBER: 1400007213)					
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this mat	tter to the following:				
	Souhel Safar, Inc. Name of Contact Person				
	Firm/Company 12553 N. Main St. Address				
•	Jacksonville FL 32218				
City/ State and Zip Code  Sbk+ax @comcas+.nc †  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, pleas	e call:				
Souhe Safar	at ( 904) 271-9845 Area Code & Daytime Telephone Number				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment

to

Articles of Incorporation

nendme	nt(s) to
e new	,
eviation tain the	
<del></del>	
	20
	<u></u>
	HAR
<u> </u>	29
71 33	À
ກ ກໍ່ ບໍ່າ 	7:
	ري :
73-	
	- eviation

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>	<u>John Do</u>	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title	•	Name		Address
1) Change	VI	ρ 	Adwar	Daword	12353 N. Main St. Ja Ksonvilla, FL 3221 8
Add					Ja Ksonvilla, FL 32218
Remove					
2) Change					
Add					
Remove					
3) Change				<del></del>	
Add					
Remove					
4) Change					·
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

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

The date of each amendment(s) adoption:	3,	22/1	6	, if other than the
date this document was signed.  Effective date <u>if applicable</u> :  (no n	3 nore than 90 day	22/1 s after amen	dment file date)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State's		statutory fili	ng requirements,	this date will not be listed as the
Adoption of Amendment(s) (CHECK (	ONE)			
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva		ber of votes	cast for the amend	iment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through entitled to vote s	voting group separately or	s. The following to the amendment(	statement (s):
"The number of votes cast for the amendment	(s) was/were suf	ficient for ap	proval	
by(voting gre	oup)	<del></del>	*•	
☐ The amendment(s) was/were adopted by the board of action was not required.		out sharehold	der action and sha	reholder
The amendment(s) was/were adopted by the incorporation was not required.  Dated  Signature  (By a director, president of selected, by an incorporation appointed fiduciary by the	r other officer – or – if in the han	if directors o	or officers have no	ot been
	Souhel  I or printed name	Safa of person si	gning)	
	(Title of pe	tent rson signing		