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AUG 3 1 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MEDITERRANE	AN VILLAGE INC			
	BER: P14000078455				
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corre	spondence concerning this ma	atter to the following:			
	MO ATABANI				
		Name of Contact Perso	n		
	MEDITERRANEAN VII.LAGE INC.				
		Firm/ Company			
	110 SOUTH FEDERAL HIGHWAY				
	Address				
	POMPANO BEACH, Ft. 33	062			
		City/ State and Zip Cod	c		
Medi	terancanvillage@hotmail.con	1			
	-	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas		773-6430		
Name (of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filling Fee & Certificate 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)		
	ling Address	Street Address Amendment Section			
Amendment Section Division of Corporations			iment Section on of Corporations		
P.O. Box 6327 Clitton Building					
Tall	ahassee, FL 32314		2661 Executive Center Circle		
		Fallahassee, FL 32301			

Articles of Amendment Articles of Incorporation of

MEDITERRANEAN VILLAGE INC.		
	ently filed with the Florida Dept. o	f State)
P14000078455		
(Document Number	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	his <i>Florida Profit Corporation</i> adop	ts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	<u>:</u>	
N/A		The new
name must be distinguishable and contain the word "corpora" "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," word "chartered," "professional association," or the abbreviation	r "Co". A professional corporatio	ted" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		29
		TE E D
D. If amending the registered agent and/or registered office a		of the Sir 🛨
new registered agent and/or the new registered office addr	ress:	
Name of New Registered Agent N/A		
(Florale	i street address)	
New Registered Office Address:		orida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Age		
I hereby accept the appointment as registered agent. I am familia		the position.
Nimer or AM	w Registered Agent, if changing	
Signature of NC	в подъястся адень у спандид	

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; F.—Treasurer, S.—Secretary, D.—Director; FR.—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	ΡŢ	<u>John Doc</u>	
X Remove	$\underline{\lambda'}$	Mike Jones	
<u>X</u> Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	SEC	ATABANI, GALAL	110 South Federal Highway
Add			POMPANO BEACH, FL 33062
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			- verify the state of the state
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	
F. 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 § .1)	
N/A	
	<u></u>
	
	

	8/22/2018	
	loption:	, if other than the
date this document was signed.		
	/2018	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date w partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(s) of flicient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
·		
8/22/2018 Dated		
Dated		
Signature		
selecte	irector, president or other officer—it directors or officers have not been d, by an incorporator—if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	MO ATABANI	
	(Typed or printed name of person signing)	
	President	
	(Fitle of person signing)	