P15000023591

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: ____TASMIAH ENTERPRISE, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: YOUNUS ALI Name of Contact Person TASMIAH ENTERPRISE, INC. Firm/ Company 2165 EAST SEMORAN BLVD Address APOPKA, FL 32703 City/ State and Zip Code younusali102@gamil.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YOUNUS ALI Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

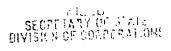
Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation of



15 MAY 12 AM 9: 33

(Name of Corporation as current	ly filed with the Florida Dept. of State)
P15000023591	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered." "professional association." or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addresses registered agent and/or the new registered office addresses	
Name of New Registered Agent N/A	
Name of New Registered Agent	
(Florida s	treet address)
Non-Posterio 1000 - CH	P1-24-
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
· · · · · · · · · · · · · · · · · · ·	with the series of the promote
Signature of New	Registered 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)

1

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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP	_	ROKEYA BEGUM	238 BRONZE LEAF CT
Add x Remove				APOPKA, FL 32703
2) Change		_		
Add Remove				
3) Change				
Add				
4) Change				
Add Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
/A	
13.00	
If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	
	·
	William Colonia Coloni
	

•	04/26/2015		
The date of each amendment(s) date this document was signed.	adoption:	e e	FICELY, if other than the SECRETARY CORPER VIOLET
Effective date <u>if applicable</u> :	4/26/2015 (no more than 90	days after amendment file date	
Note: If the date inserted in this document's effective date on the		able statutory filing requirement	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The sufficient for approval.	number of votes east for the ame	endment(s)
	approved by the shareholders through		
"The number of votes ea	ast for the amendment(s) was/were	e sufficient for approval	
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors	without shareholder action and s	hareholder
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators with	out shareholder action and share	holder
04/26/20 Dated	015		
Signature	Yourus Ali.		
(By sele	a director, president or other offic cted, by an incorporator – if in the binted fiduciary by that fiduciary)		
	YOUNUS ALI		
	(Typed or printed r	name of person signing)	
	President		
	(Title o	of person signing)	***************************************