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2022 OCT 17 PH 3: 56

1/11/2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: CREDENCE BEG	GS MART INC			
DOCUMENT NUMB		14.00			
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	FASI SYED				
-		Name of Contact Persor	1		
	CREDENCE BEGGS MAR	ΓINC			
•		Firm/ Company			
	5500 BEGGS RD	Time Company			
-	Address				
	ORLANDO, FL 32810				
-	.=	City/ State and Zip Cod-	c		
farmo	@yahoo.com				
	· - ·	sed for future annual report	notification)		
	13 man address. (10 oc u.	section ratione difficult reports	, in a second se		
For further information	concerning this matter, pleas	se call:			
FASI SYED		at (321	8776988		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		Street	Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

CREDENCE BEGGS MART INC

2022 OCT 17 PM 3:56

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P15000038545	TALLA: ASSEE, FL
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:	
N.A	The new
name must be distinguishable and contain the word "corpora "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	tion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
P. Entannay principal office address: if applicables	N.A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N.A
(Matting duaress MAT BE A FOST OF FICE BOX)	
D. If amending the registered agent and/or registered office ac	
new registered agent and/or the new registered office address.	<u>rss:</u>
N.A Name of New Registered Agent N.A	<u> </u>
(Florida	street address)
R. D. C. LOW (III)	Pleate
New Registered Office Address:	City: Zap Code;
	•
New Registered Agent's Signature, if changing Registered Age	ent:
hereby accept the appointment as registered agent. I am familia	
Signature of New	v 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)

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</u>	<u>Doe</u>			
X Remove	<u>V</u> <u>Mike</u>	e Jones			
X Add	<u>SV</u> <u>Sally</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
1) Change	PRESID	SIRAJUDDIN MOHAMMED	8301 DIAMOND COVE CIRCLE		
X Add			ORLANDO, FL 32836		
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove			<u> </u>		
4) Change					
Add					
Remove					
5) Change					
Add					
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 N/A)
N.A

	10/10/2022	
The date of each amendment(s) a date this document was signed.	adoption:	if other than the
10	/10/2022	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(110) тоге інал 90 ааух арег ателатолі зне аспез	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we bepartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adaction was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adaction was not required.	lopted by the incorporators without shareholder action and shareholder	
10/10/202 Dated	2	
Signature	Fasi	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	FASI SYED	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	