## P150000 74270

| (Requestor's Name)                      |
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| (City/State/Zip/Phone #)                |
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| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Business Entity Name)                  |
| (Document Number)                       |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR  | ATION: Sam's Food Store I   | nc   |   |  |  |
|---|---|--|---|--|--|
| DOCUMENT NUMB   | ER:   |  |   |  |  |
|   | of Amendment and fee are su   | bmitted for filing.  |   |  |  |
| Please return all corres  | pondence concerning this mat  | ter to the following:  |   |  |  |
|   | Saman Kawar   |  |   |  |  |
| -   |   | Name of Contact Person   | 1   |  |  |
|   | Sam's Food Store Inc  |  |   |  |  |
| -   |   | Firm/ Company  |   |  |  |
|   | 5512 Normandy Blvd  |  |   |  |  |
| -   | Address   |  |   |  |  |
|   | Jacksonville Fl 32205   |  |   |  |  |
| -   |   | City/ State and Zip Code   | ÷   |  |  |
| tntrlt l  | @bellsouth.net  |  |   |  |  |
|   | ~   | ed for future annual report  | notification)   |  |  |
|   | concerning this matter, pleas   |  | 100 0550  |  |  |
| Saman Kawar   |   | at (   | _)  |  |  |
| Saman Kawar at (904 ) 422-3558  Name of Contact Person Area Code & Daytime Telephone Number |   | de & Daytime Telephone Number                                      |   |  |  |
| Enclosed is a check for   | the following amount made p   | payable to the Florida Depa  | artment of State:   |  |  |
| □ \$35 Filing Fee   | □\$43.75 Filing 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)    |  |  |
| Ame<br>Divi<br>P.O.   | ndment Section<br>sion of Corporations<br>Box 6327<br>shassee, FL 32314 | Amend<br>Divisio<br>Clifton<br>2661 E                              | Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301 |  |  |

## Articles of Amendment to Articles of Incorporation of

FILLED SERVETARY OF STATE DIVISION OF CORPORAL CAS

15 SEP 24 PM 1:48

| (Name of Corporation as curren   | tly filed with the Florida Dept. of State)                    |
|--|---|
| Sam's Food Store Inc   | P15000074270  |
| (Document Number   | of Corporation (if known)                                     |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:   | s Florida Profit Corporation adopts the following amendment(s |
| A. If amending name, enter the new name of the corporation:  |   |
|  | The new   |
| name must be distinguishable and contain the word "corporati<br>"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the        |
| B. Enter new principal office address, if applicable:  | 5512 Normandy Blvd  |
| (Principal office address MUST BE A STREET ADDRESS)  | Jacksonvillel Fl 32205  |
|  |   |
|  |   |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  |   |
| ,  |   |
|  |   |
|  |   |
| D. If amending the registered agent and/or registered office ad-<br>new registered agent and/or the new registered office addre  | <u>dress in Florida, enter the name of the</u><br><u>ss:</u>  |
| Name of New Registered Agent   |   |
|  |   |
| (Florida s   | street address)   |
| New Registered Office Address:   | , Florida   |
|  | (City) (Zip Code)   |
|  |   |
| New Registered Agent's Signature, if changing Registered Ager  | nt:   |
| I hereby accept the appointment as registered agent. I am familia  | r with and accept the obligations of the position.            |
|  |   |
|  |   |
| Signature of Nau   | 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>    | John Doe               |                    |  |  |
|----------------------------|--------------|------------------------|--------------------|--|--|
| X Remove                   | <u>v</u>     | Mike Jones             |                    |  |  |
| X Add                      | <u>sv</u>    | Sally Smith            |                    |  |  |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>            | <u>Addres</u> s    |  |  |
| 1) Change                  | Vp           | Haddadin, Zawaiseh     | 5512 Normandy Blvd |  |  |
| Add                        |              |                        | Jax Fl 32205       |  |  |
| Remove                     |              |                        |                    |  |  |
| 2) Change                  | VP           | Sana Haddadin Zawaideh | 5512 Normandy Blvd |  |  |
| x Add                      |              |                        | Jax Fl 32205       |  |  |
| Remove                     |              |                        |                    |  |  |
| 3) Change                  |              |                        |                    |  |  |
| Add                        |              |                        |                    |  |  |
| Remove                     |              |                        |                    |  |  |
| 4) Change                  |              |                        |                    |  |  |
| Add                        |              |                        |                    |  |  |
| Remove                     |              |                        |                    |  |  |
| 5) Change                  |              |                        |                    |  |  |
| Add                        |              |                        |                    |  |  |
| Remove                     |              |                        |                    |  |  |
| 6) Change                  |              |                        |                    |  |  |
| Add                        |              |                        |                    |  |  |
| Remove                     |              |                        |                    |  |  |

| Attach additional sheets, if neces | ssary). (Be specific) |                         |                    |          |
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| f an amendment provides for        | an arabanga maalassif | ination or concellation | n of issued shares |          |
| provisions for implementing t      | he amendment if not c | contained in the amend  | dment itself:      |          |
| (if not applicable, indicate       | N/A)                  |                         |                    |          |
|                                    |                       |                         |                    |          |
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|   | 09/10/2015  |                           | :Cathan than th                             |
|---|---|---------------------------|---|
| The date of each amendment(s) addate this document was signed.            | 0/2015  | SEGRETAR<br>DIVISIEN OF C | if other than the Y UF SPAIL ONE OF ANTENNS |
| Effective date <u>if applicable</u> :                                     |   |                           |   |
|   | (no more than 90 days after amendment file date)  | 15 SEP 24                 | PM 1:48                                     |
| Note: If the date inserted in this be document's effective date on the De | lock does not meet the applicable statutory filing requirements partment of State's records.                                  | , this date will no       | ot be listed as the                         |
| Adoption of Amendment(s)  | ( <u>CHECK ONE</u> )  |                           |   |
| The amendment(s) was/were ado by the shareholders was/were su:            | pted by the shareholders. The number of votes cast for the amen   | ndment(s)                 |   |
|   | roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment |                           |   |
| "The number of votes cast   | for the amendment(s) was/were sufficient for approval   |                           |   |
| by  | (voting group)  |                           |   |
|   | (voting group)  |                           |   |
| ☐ The amendment(s) was/were ado action was not required.                  | pted by the board of directors without shareholder action and sh  | areholder                 |   |
| ☐ The amendment(s) was/were ado action was not required.                  | pted by the incorporators without shareholder action and shareh   | older                     |   |
| Dated   | 9/20/2016   |                           |   |
| Signature   | Jam Kare  |                           | _   |
| (By a d   | irector, president or other officer - if directors or officers have r   |                           |   |
|   | d, by an incorporator – if in the hands of a receiver, trustee, or o  | ther court                |   |
| appoint   | ted fiduciary by that fiduciary)  |                           |   |
|   | the SAMAN KAMAN   |                           |   |
|   | (Typed or printed name of person signing)   |                           |   |
|   | President   |                           |   |
|   | (Title of person signing)   |                           |   |