P160000 12375

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: VICTORY FOOD	MART INC			
DOCUMENT NUME	BER: P1600012375				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	Usman Ahmed				
		Name of Contact Person	1		
	VICTORY FOOD MART IN	iC			
		Firm/ Company			
	8021 BLOUNSTSTOWN W	AY			
•		Address			
	TALLAHASSEE FL 32310				
		City/ State and Zip Code	2		
USMA	ANKDA123@YAHOO.COM	I	J		
		sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
ALI HAMID		at (5950714		
Name o	f Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment 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 Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, 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 of

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(Name of Corporation	on as currently filed with the F	Florida Dept. of State)	
P16000012375			
(Docum	ent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Co	erporation adopts the following amendm	nent(s) to
A. If amending name, enter the new name of the con	rporation:		
		The ne	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the d	" "Inc," or "Co". A profession	or "incorporated" or the abbreviation on all corporation name must contain the	on he
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD			
		7	
C. Enter new mailing address, if applicable:		A control of the cont	71
(Mailing address MAY BE A POST OFFICE BOX	<u>X</u>)	<i>y</i> : y	一
		P	
		<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		nter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Regi	stored Agent		
I hereby accept the appointment as registered agent.		e obligations of the position.	
Signa	nture of New Registered Agent, i	f 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 Doc	
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	Scretary	Usman Ahmed	2206 Walden Crossing Drive
X Add			Canton GA 30115-9515
Remove			
2) Change			
Add			
Remove			
3)Change			
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Remove			
4) Change			
Add			<u> </u>
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5) Change			
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6) Change			
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Remove			

	(Be specific)
A	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

	June 9, 2017	
	ption:	, if other than th
date this document was signed.	2017	
Effective date <u>if applicable</u> :	0, 2017	
	(no more than 90 days af	fter amendment file date)
Note: If the date inserted in this blocument's effective date on the Dep		tutory filing requirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number icient for approval.	of votes cast for the amendment(s)
	oved by the shareholders through voting ach voting group entitled to vote sepa	
"The number of votes cast for	or the amendment(s) was/were sufficie	ent for approval
by	· · · · · · · · · · · · · · · · · · ·	.,,,
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without s	shareholder action and shareholder
The amendment(s) was/were adoptaction was not required.	ted by the incorporators without share	cholder action and shareholder
June 09, 201 Dated	7	
Signature		
selected.	ector, president or other officer – if di by an incorporator – if in the hands o d fiduciary by that fiduciary)	
F	abia Ashraf	
	(Typed or printed name of p	person signing)
1	resident	

(Title of person signing)