## P1600041298

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Dusiness Littly Harrie)			
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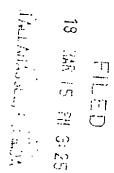
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: FLEGY INC.				
DOCUMENT NUME	BER: P16000041298				
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Mark B Ruchala				
		Name of Contact Persor	1		
	Pelican Bookkeeping & Tax Service				
		Firm/ Company			
	P O Box 245				
Address					
	Estero, FL 33929				
		City/ State and Zip Code	2		
	1				
rucha	llamrk@aol.com	100			
	h-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Mark B Ruchala		at (	246-9681		
Name	of Contact Person	at (239 246-9681 Area Code & Daytime Telephone Number			
Enclosed is a check for	r the following amount made	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)		
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations			
	. Box 6327 ahassee, FL 32314	Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FLEGY INC				
(Name o	of Corporation as curren	tly filed with the Florida Dept. of	State)	
P16000041298				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts	s the following amendn	nent(s) to
A. If amending name, enter the new na	ime of the corporation:			
N/A			The ne	?\P
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional corporation	ed" or the abbreviation to the must contain to	on he
R Enter new principal office address	if annlicable:	19050 S Tamiami Trail		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		Fort Myers, FL 33908		
			·,	•
			( c.	5
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P O Box 245		·
		Estero. FL 33929	<u> </u>	
			·	
			် (၃	. •
D. If amending the registered agent an new registered agent and/or the new			f the Sp. Sp.	
-	Amro Heidak			
Name of New Registered Agent 19050 S Tamiami Trail				
		(treet address)		
N 0 1 1446 444	Fort Myers		33908	
New Registered Office Address:		, 140 , (City)	orida <u>(Zip Code)</u>	-
New Registered Agent's Signature, if c I hereby accept the appointment as regist			the position	
The same of the supplemental and ogain				
	Singuis of Vision	Registered Agent, if changing		
	мупанте ој меж	кедметеа ядет, у спапуту		

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.

X Change	<u>PT</u> ,	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u> <u> </u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Amrou Heidak	19050 S Tamiami Trail
Add			Fort Myers, FL 33908
X Remove			
2) Change	P	Amro Heidak	19050 S Tamiami Trail
X Add			Fort Myers, FL 33908
Remove			
3) Change			
Add			
Remove			
4) Change	<del> </del>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
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

•	01/01/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than th
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this locument's effective date on the D	block does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes east for the amenda afficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following start 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)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and share	holder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and sharehold	er -
03/09/201	8	
Dated	10	
Signature		
	lirector, president or other officer - if directors or officers have not	
	d, by an incorporator – if in the hands of a receiver, trustee, or other	court
аррон	nted fiduciary by that fiduciary)	
	Aly Mamdouh Rashed	
	(Typed or printed name of person signing)	<del></del>
	Vice President	
	(Title of person signing)	