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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: HOLY LAND PROPERTY INVESTMENT INC.

Name of Corporation

DOCUMENT NUMBER: P16000048434

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MATAR, ABDALLA

Name of Contact Person

HOLY LAND PROPERTY INVESTMENT INC.

Firm/Company

13021 TERRACE SPRINGS DR.

Address

TEMPLE TERRACE, FL 33637

City/State and Zip Code

amatar2829@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MATAR, ABDALLA

...813

727-5359

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

Articles of Amendment to Articles of Incorporation of

HOLY LAND PROPERTY INVESTMENT INC.

(Name of Corporati	ion as currently lifed with the Florida Del	pt. of State)
P16000048434		****
(Docun	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floridate Articles of Incorporation:	a Statutes, this Florida Profit Corporation a	adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	" "Inc," or "Co". A professional corpor	porated" or the abbreviation
B. Enter new principal office address, if applicable	e:	
(Principal office address <u>MUST BE A STREET ADL</u>		
		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
	 	
D. If amending the registered agent and/or register	red office address in Florida, enter the na	eme of the
new registered agent and/or the new registered	office address:	
Name of New Registered Agent		
Nume of New Registered Agent		
	(Florida street address)	
	(rioriaa sireei aaaress)	
New Registered Office Address:	(City)	_, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	tistored Agent	
hereby accept the appointment as registered agent.		ns of the position.
Sign	nature 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)

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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	ABDALLAH MATAR	13021 TERRACE SPRINGS DR.
Add			TEMPLE TERRACE, FL 33637
X Remove			
2) Change	P	ABDALLA MATAR	13021 TERRACE SPRINGS DR.
X Add			TEMPLE TERRACE, FL 33637
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. 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)	(Attach additional sheets, if necessary).	(Be specific)	s) here:		
provisions for implementing the amendment if not contained in the amendment itself:	***************************************				
provisions for implementing the amendment if not contained in the amendment itself:					
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provisions for implementing the amendment if not contained in the amendment itself:					
	provisions for implementing the am	hange, reclassificat endment if not cont	ion, or cancellation ained in the amendr	of issued shares, nent itself:	
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The date of each amendment(s) addate this document was signed.	option:	, if other than th
-	0/2016	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	te will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(sficient for approval.	·)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast f	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	г
06/20/2016 Dated		
Signature		
	rector, president or other officer - if directors or officers have not been	
	l, by an incorporator - if in the hands of a receiver, trustee, or other cour	t
appointe	ed fiduciary by that fiduciary)	
_	(Typed or printed name of person signing)	····
	(Typed or printed name of person signing)	
_	Plesi dent	
	(Title of person signing)	