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Office Use Only



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C. Lewis 1-15-17

COVER LETTER

TO: Amendment Section Division of Corporations	<i>[</i>			
NAME OF CORPORATION: She per	d Inc			
DOCUMENT NUMBER: \$ 16 000	20 5308	S		
The enclosed Articles of Amendment and fee are sub	mitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
Mena Coi Shepero 8243 cha Tollahossee Menagiraus Co	Firm/ Company Firm/ Company Mington Address City/ State and Zip Code and For future annual report	Forest Blud		
For further information concerning this matter, pleas	e call:			
Mena Cirous	at (050	12/1/0835		
Name 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:		
\$35 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		dment Section		
Division of Corporations	Division of Corporations			
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
Taliahassee, FL 32314	2001	Presente Cetter Cilete		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

(Name of Corporation as currently filed with the Florida Dept. of State)

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.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)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

new registered agent and/or the new registered office address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida street address)

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: XChange	PT John	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add Remove	CEO	Emad Girgus	5243 charrington Forest 6/Vd. Tollowsee 5-londo. 32312
2) Change Add Remove	<u>CEo</u>	Meha Girgus	8243 charrington Forest blud. Tollahosse 51. 32312
Change Add Remove			
4) Change Add Remove			· · · · · · · · · · · · · · · · · · ·
5) Change Add Remove			
6) Change Add Remove			

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an amendment	provides for an	exchange, re	classification.	or cancellation	n of issued share dment itself:	es.
provisions for it	uplementing the	amend mem	classification, if not containe	or cancellation	n of issued share dment itself:	<u>es.</u>
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rovisions for it	uplementing the	amend mem	elassification, if not contain	or cancellation	n of issued shardment itself:	25.

The date of each amendment(s) adoption:	//5//7	<u> </u>	D, if other than the
date this document was signed.	•		DH 1:50
	•	17 FEB 15	
Effective date if applicable:	o more than 90 days after amendme.	nt file date) :::.\	UI STANDA
(***		- SHIMINGSI	E. FLORION
		المستعامات المستعارات	
Adoption of Amendment(s) (CHEC	K <u>ONE</u>)		
Phe amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro	cholders. The number of votes cast oval.	for the amendmer	nt(s)
The amendment(s) was/were approved by the sha must be separately provided for each voting gro	areholders through voting groups. 7 nup entitled to vote separately on the	The following state amendment(s):	ment
"The number of votes east for the amendm	ent(s) was/were sufficient for approv	val	
by		.,,	
(voting	group)		
The amendment(s) was/were adopted by the boa action was not required.	rd of directors without shareholder	action and shareho	older
The amendment(s) was/were adopted by the increation was not required.	orporators without shareholder actio	n and shareholder	
Dated 2/15/1	7		
Signature Start director preside	nt or other officer - if directors or o	fficers have not be	een
selected, by an incorp-	orator – if in the hands of a receiver	, trustee, or other (court
appointed fiduciary by	that fiduciary)		
~ .	1 0		
_ Ema	(Typed or printed name of person	un cionina)	
	(1 yped of printed name of perso	ur aigumg)	
	Fo		·
	(Title of person signing)	