P160000 82533

(Requestor's Name)				
(Address)				
(Address)				
(City (Chair File (Chaire))				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Octuined dopies Octuined dopies				
Special Instructions to Filing Officer:				
apecial instructions to planing officer.				

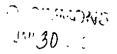
Office Use Only



900322541709

01/23/19-01010-003 **35.00





COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: _ DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BENUSA CORP Firm/ Company For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ■\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of Incorporation of

BENUSA	CORP	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P160000E	32533	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fi its Articles of Incorporation:	lorida Profit Corporation adopts the following appendix	dy(s) to
A. If amending name, enter the new name of the corporation:	The new	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	11471 SW 238st	
(Principal office address MUST BE A STREET ADDRESS)	HOMESTEAD, FL 3303	2
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11471 SW 238st	
	HOMESTEAD, FL 33032	
D. If amending the registered agent and/or registered office address: Name of New Registered Agent	ss in Florida, enter the name of the	
(Florida stree	et address)	
New Registered Office Address:	. Florida	
	City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	th and accept the obligations of the position.	
Signature of New Reg	gistered 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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>\$V</u>	Sally Sm	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	_P	_	RIZKALLAH WAKIL	
X Add				HOMESTEAD FL, 33032
Remove				
2) 🔏 Change	V.P) <u>·</u>	ENMA M. WAKIL	11471 SW 238st
Add				HOMESTEAD, FL 33032
Remove				
3) Change		<u> </u>		
Add				.
Remove				
4) Change		_		JAN 23
Add				1110
Remove				The second
5) Change		_		10 P
Add				
Remove				
6) Change		_		 _
Add				
Remove				

ttach additional sheets, if necessary). (Be specific)	
	
	そら ここ
	- F. E.
	7 7 7
	्रिक्ट के
	무슨 💂
	11.
	97 7
	5m 2
	• ••
an amendment provides for an exchange, reclassification, or cancellation of issued sh	nares,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	<u> </u>
	<u>-</u> -
<u></u>	

The date of each amendment(s) adoption:	12/28/2018	if other than
date this document was signed.	12/78/2019	
Effective date <u>if applicable</u> :	more than 90 days after umendment file date)	
Note: If the date inserted in this block does not me document's effective date on the Department of State'	eet the applicable statutory filing requirements, this date 's records.	will not be listed as
Adoption of Amendment(s) (CHECK	ONE)	
☐ The amendment(s) was/were adopted by the sharelest by the shareholders was/were sufficient for approx	holders. The number of votes east for the amendment(s) val.	
	cholders through voting groups. The following statement p entitled to vote separately on the amendment(s):	
"The number of votes east for the amendmen	nt(s) was/were sufficient for approval	
by	<u>.</u>	
(voting gi	roup)	
☐ The amendment(s) was/were adopted by the board action was not required.	l of directors without shareholder action and shareholder	SECRET
The amendment(s) was/were adopted by the incorpaction was not required.	porators without shareholder action and shareholder	LED 23 N
Dated12/28	1/2018	TLORIE
Signature Emma Way		
(By a director, president	or other officer - if directors or officers have not been	
	ator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by th	nat fiduciary)	
	Enma Wakil	
(Type	ed or printed name of person signing)	
Vi	ice President	
· _	(Title of person signing)	

the

the