P16000090247

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORP	ORATION: WAVERLY MINI	MART, INC	
DOCUMENT NU	MBER: P16000090247		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	KAMRUL II KHAN		
		Name of Contact Perso	on
		Firm/ Company	
	8926 BYRON AVENUE		
	SURFSIDE, FL 33154	Address	
		City/ State and Zip Co	de
	SONIA@GSTOLLEY.COM		
	E-mail address: (to be us	ed for future annual repor	t notification)
For further informat	ion concerning this matter, pleas	e catt:	
KAMRUL H KHA	· ·	at (380-7817
Nam	e of Contact Person	Area Co	ode & Daytime Telephone Number
inclosed is a check	for the following amount made p	payable to the Florida Dep	partment of State:
Z 835 Filling 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)
Ar Di P.G	nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amen Divisi The C	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as curre	ntly filed with the Florid	a Dept. of State)	
216000090247			
(Document Numbe	er of Corporation (if knowr	1)	
ursuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	nis <i>Florida Profit Corpora</i>	tion adopts the following amend	lment(s)
If amending name, enter the new name of the corporation:			
v A		The n	1/DU
ame must be distinguishable and contain the word "corporation," lnc, "-or-Co.," or the designation "Corp," "lnc," or "Co", chartered," "projessional association," or the abbreviation "P.,	A professional corpora	rated" or the abbreviation "Corr	, ''
Enter new principal office address, if applicable:	N/A		
Principal office address <u>MUST BE A STREET ADDRESS</u>)		•.1	_
		:	_
			_
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	,	
			-
		<u>න</u> දිර	_
		<u> </u>	_
. If amending the registered agent and/or registered office a	ddress in Florida, enter ti	he name of the	
new registered agent and/or the new registered office addre	ess:		
Name of New Registered Agent N/A			
(Florida	street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	

Signature of New Registered Agent, if changing

ick if applicable

The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (e), F.S.

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:

<u>N</u> Change	<u>PT</u> <u>Jol</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	KAMRUL H KHAN	8926 BYRON AVENUE
X Add			SURFSIDE, FL 33154
Remove			
2) Change	P	ABU M NASIM	726 82ND ST
Add			MIAMI BEACH, FL 33441
X Remove 3.1 Change			
Add			
Remove			
ti Change			
<u> </u>			
Remove			
Change			
Add			
Remove			
Change			
Add			
Remove			

	ticles, enter change(s) hero (Be specific)	:		
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f an amendment provides for an excl	hange, reclassification, or	cancellation of issued :	shares,	
provisions for implementing the amo (it not applicable, indicate N/A)	indment if not contained i	n the amendment itsel	<u>[:</u>	
.,				
			·	
				 -
				 -

The date of each amendment(s) ad	11 /23/2020 option:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors without shareholder action	and shareholder
. The amendment(s) was/were adop by the shareholders was/were sut	nted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
The amendment(s) was/were appr must be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
	or the amendment(s) was/were sufficient for approval	
by	(Valing group)	
	(voting group)	
11/23/2020 Dated		
Signature	-l 4- +-	
(By a dir selected.	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
ŀ	CAMRUL II KHAN	
_	(Typed or printed name of person signing)	
Ŀ	RESIDENT	
_	(Title of person signing)	