P11000000518

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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COVER LETTER

2011 AUG 28 AM 9-52 TO: Amendment Section Division of Corporations Main St Fried Chicken Inc. NAME OF CORPORATION: P17000000518 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Qaher Ghani Name of Contact Person Main St Fried Chicken Inc. Firm/ Company 2022 N Main St Address Kissimmee, FL 34744 City/ State and Zip Code sghani03@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Qaher Ghani Name of Contact Person 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 Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Main St Fried Chicken Inc.

(Name of Corporation as currently	iled with the Florida Dept. of State)	7
P17000000518	,	A. 2.
(Document Number of C	orporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this Fl its Articles of Incorporation:	orida Profit Corporation adopts the following ame	endment(s) to
A. If amending name, enter the new name of the corporation: N/A	27	
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.	"company," or "incorporated" or the abbrev ". A professional corporation name must conta	new viation in the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: N/A Name of New Registered Agent	s in Florida, enter the name of the	_
(Florida street	address)	
New Registered Office Address:	irv) , Florida (Zip Code)	
, c	iry) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.	
Cin C.V. D	istered 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: <u>X</u> Change	<u>PT</u>	John Doc	<u> </u>	
X Remove	<u>V</u>	Mike Jon	n <u>es</u>	
X Add	<u>sv</u>	Sally Sm	<u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	T		Abdullah Babury	55 Croyden Ln
X Add				Hicksville, NY 11801
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Ramova				

/A	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)
	•
	
<u> </u>	
•	
	amendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	isions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
A	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
N/A		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this l document's effective date on the De	block does not meet the applicable statutory filing requirements, this datepartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ad- by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(officient for approval.	s)
	proved by the shareholders through voting groups. The following statems each voting group emitted to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	er
action was not required.		
DatedAugust	21, 2017	
Signature	lirector, president or other officer – if directors or officers have not been	
(By a c selecte	lirector, president or other officer – if directors or officers have not been id, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Qaher Ghani	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	