P17000006960

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	e#) .
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(Do	ocument Number)	
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SECRETARY OF CHATE OF CORPORATION OF CORPORATION AT 18 PM 12: 50

V HERRING MAY 1 2 2017



March 21, 2017

OLEKSANDR KHUDASH KHUDASH INVEST INC 1722 MAYO ST, APT 104 HOLLYWOOD, FL 33020

SUBJECT: KHUDASH INVEST INC

Ref. Number: P17000006960

We have received your document for KHUDASH INVEST INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Amendments are filed in compliance with section 607.1006, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 817A00005396

Valerie Herring Regulatory Specialist II

www.sunbiz.org



April 19, 2017

OLEKSANDR KHUDASH KHUDASH INVEST INC 1722 MAYO ST, APT 104 HOLLYWOOD, FL 33020

SUBJECT: KHUDASH INVEST INC Ref. Number: P17000006960

We have received your document for KHUDASH INVEST INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Valerie Herring Regulatory Specialist II

Letter Number: 417A00007649

www.sunbiz.org

District of Comment of D.O. DOV COOR Melleles of The 13, 2001

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	KHU	DASH	IN	VEST	INC		
DOCUMENT NUMBER:	P17000	000691	60				
The enclosed Articles of Amendm	ent and fee are sub	omitted for filing.					
Please return all correspondence c	oncerning this matt	er to the following	g:				
	Name of Contact Person Khudash Invest Inc Firm/Company 1722 Mayo street, Apt 104 Address Hollywood, FL 35020 City/State and Zip Code						
KI	nudash	Invest	Inc				
		Firm/ Com	pany				
17	1722 Mayo street, Apt 104						
		Address	S				
<u> No</u>	llywood	FL	350	20			
	,	City/ State and 2	Zip Code				
E-mail	address: (to be uso	ed for future annua	al report n	otification)			
	·		•				
For further information concerning this matter, please call:							
·	, , , , , , , , , , , , , , , , , , ,						
Oleksandr K Name of Contact P	hudash	at (-7	786	90999	8 6 6		
Name of Contact P	erson		Area Code	e & Daytime Telep	hone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:							
•	75 Filing Fee & ficate of Status	□\$43.75 Filing Certified Copy (Additional copenclosed)	у	□\$52.50 Filing F Certificate of S Certified Copy (Additional Co is enclosed)	tatus		
Mailing Address			Street A				
Amendment Sec Division of Corp		Amendment Section Division of Corporations					
P.O. Box 6327		Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle					cle		

Articles of Amendment Articles of Incorporation of

SECRETARY OF STATE

KHUDASH INVEST INC

(Name of Corporation as o	currently filed with the Florida Dept. of State)
P1700	000 69 60
	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statu its Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corpora	
name must be distinguishable and contain the word "cor" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc. word "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable:	1722 Mayo street
(Principal office address MUST BE A STREET ADDRESS	1722 Mayo street Apt 104
,	Nollywood, FL 33020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1722 Mayo street
	1,1 104
	1,1 104 Hollywood, FL 33.0 20
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	
(Fi	orida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	i Agent:
I hereby accept the appointment as registered agent. I am fo	amiliar with and accept the obligations of the position.
Signature of	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 <math>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>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>.</u> n <u>ith</u>	•
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change			•	
Add	<u> </u>	-		
Remove				
3) Change		_		
Add				
Remove				
4) Change		-		
Add				
Remove				
5) Change		-		
Add				
Remove				
6) Change		-		
Add				

Attach additional shee	g additional Articles, enter chang ets, if necessary). (Be specific)		
		·	
<u> </u>			
·- ·- ·-			
f an amendment pro provisions for imple (if not applicable	vides for an exchange, reclassifica menting the amendment if not con , indicate N/A)	tion, or cancellation of i tained in the amendmen	ssued shares, it itself:
		. ** **	
		·····;	
			,

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendme by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	•
Dated V 04/07/2017	
Signature By a director president or other officer – if directors or officers have not be	on.
selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
V President	

(Title of person signing)