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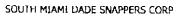


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COVER LETTER

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TO: Amendment Section Division of Corpo				9
NAME OF CORPOR	SOUTH MIAMI E	DADE SNAPPERS CORP		MI JUN 30 M 9: 26
DOCUMENT NUMB	3			
The enclosed Articles (of Amendment and fee are su	ebmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
		Miguel A. Maspons, Esq		
-		Name of Contact Per	son	
		Maspons, Sellek, Jacobs,	LLP	
-		Firm' Company		
	2	333 Ponce De Leon Blvd., S	Suite 314	
-		Address		
		Coral Gables, Florida 33	134	
-	<u> </u>	City/ State and Zip C	'ode	
		amer.naji@hotmail.com		
	E-mail address; (to be u	sed for future annual rep	ort notification)	
For further information	concerning this matter, pleas	se call:		
Vane	essa M. Collazo	786	539-1430	
Name o	f Contact Person		Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida D	epartment of State:	
■ \$35 Filing Fee	□\$43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment Articles of Incorporation





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

P17000025995

it(s) to

Pursuant to the week below with a select the root of	ocument Number of Corporation (if know	νn)
its Articles of Incorporation:	lorida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendme
A. If amending same, enter the new name of the	he corporation;	
nama must he distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Corp," "Inc," or "Co". A professional	The new "incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if applic (Principal office address <u>MUST HE A STREET</u>	ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)	
D. If amending the registered agent and/or reg new registered agent and/or the new register	ristered office address in Florida, enter ered office address;	the name of the
D. If amending the registered agent and/or reg new registered agent and/or the new register Name of New Registered Agent	zistered office address in Florida, enter ered office address; Amer Naji	the name of the
new registered agent and/or the new registe	ered office address;	the name of the
new registered agent and/or the new registe	ered office address: Amer Naji	the name of the
new registered agent and/or the new registe	ered office address: Amer Naji 9610 S.W. 160th Street	the name of the Florida

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:

 $P = President; \ U = Vice President; \ T = Treasurer, \ S = Secretary; \ D = Director, \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD$

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	$\overline{\text{b.L.}}$	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Khaled J. Alsoudi	13499 Biscayne Blvd., Apt. 403
Add			North Miami, FL 33181
X Remove 2) Change	VP	Nader G. Naji	10637 Hammocks Blvd., Apt. 938
Add			Miami, FL 33196
	Р	Nader G. Naji	11461 Lakeside Dr., Apt. 4104
Add Remove			Doral, Florida 33178
4) Change	VP	Amer Naji	11461 Lakeside Dr., Apt. 4104 Doral, Florida 33178
Add			
5) Change			
Remove			
6) Change Add			
Pamova			

f amending or adding additional Arti Attach ælditional sheets, if necessary).	(Be specific)					
						
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				_		
				-		
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,						
	·		·····			
f an amendment provides for an excl	nange, reclassifi	cation, or cane	cellation of iss	ued shares.		
provisions for implementing the ame (if not applicable, indicate N A)	ndment if not c	ontained in the	e amendment	itself:		
(у погаррисане, такае х х)						
						
				•		
		 ,				
						_

The date of each amend		, if other than th
date this document was si	gned.	
Effective date <u>if applica</u>		
	(no more than 90 days after amendment file date)	
	d in this block does not meet the applicable statutory filing requirements, this d on the Department of State's records.	late will not be listed as th
Adoption of Amendmen	t(s) (<u>CHECK ONE</u>)	
	s were adopted by the shareholders. The number of votes cast for the amendment as/were sufficient for approval.	(s)
	stwere approved by the shareholders through voting groups. The following staten ovided for each voting group entitled to vote separately on the amendment(s):	<u>ા</u>
"The number of	votes east for the amendment(s) was were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) wa action was not require	s/were adopted by the board of directors without shareholder action and sharehold.	ler
☐ The amendment(s) wa action was not require	s-were adopted by the incorporators without shareholder action and shareholder d.	
Dated_	6/28/17	
Signate	ire	
·	(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	Miguel A. Maspons	
	(Typed or printed name of person signing)	
	Attorney-in-Fact for Company	
	(Title of person signing)	