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| • | COVER LETTER | | | | |
|--|---|--|--|--|--|
| TO: Amendment Secondivision of Corp | | İ | | | |
| NAME OF CORPO | RATION: ALKARACK ABI | RAHAM INC | | | |
| | BER: P17000033926 | | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | | |
| | SALEM QARALEH | | | | |
| | | Name of Contact Persor | 1 | | |
| | ALKARACK ABRAHAM INC | | | | |
| | | Firm/ Company | | | |
| | 2211 AVENUE E | | | | |
| | | Address | | | |
| | FORT PIERCE, FL 34950 | | | | |
| | | City/ State and Zip/Code | : | | |
| | | | | | |
| _ | E-mail address: (to be us | sed for future annual report | notification) | | |
| For further information | n concerning this matter, pleas | se call: | | | |
| SALEM QARALEH | | at (772 | | | |
| Name of Contact Person Area Code & Daytime Telepho | | de & Daytime Telephone Number | | | |
| Enclosed is a check for | or the following amount made | payable to the Florida Depa | rtment of State: | | |
| ■ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is | □\$52.50 Filing Fee Certificate of Status Certified Copy | | |

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

Certified Copy (Additional Copy

is enclosed)

Articles of Amendment to Articles of Incorporation of

LIZADAZNIZADDAJIANA INIZ

| ALKARACK ABRAHAM INC | | |
|---|---|-----------------------------|
| (Name of Corpora | tion as currently filed with the Florida Dept. of Sta | <u></u> |
| P17000033926 | | |
| (Docu | iment Number of Corporation (if known) | · · · |
| Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation: | da Statutes, this <i>Florida Profit Corporation</i> adopts th | e following amendment(s) to |
| A. If amending name, enter the new name of the | corporation: | |
| | | The new |
| name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the | ord "corporation," "company," or "incorporated" p," "Inc," or "Co", A professional corporation no e abbreviation "P.A." | or the abbreviation |
| B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B. | <u>OX</u> 1 | |
| | | |
| | | 1 25.1 |
| | 1.65 | |
| new registered agent and/or the new registered | ered office address in Florida, enter the name of the doffice address: | |
| Vanes of Van Basistand trans | | به ريان مارين |
| Name of New Registered Agent | | 연 Sil 연합 PH 12 |
| | (Florida street address) | |
| | | |
| New Registered Office Address: | Ciny | a (Zip Code) |
| | | , |
| | | |
| New Registered Agent's Signature, if changing Re | | |
| I hereby accept the appointment as registered agent. | I am familiar with and accept the obligations of the | position. |
| | | |
| | | |
| Sig | nature of New Registered Agent, if changing | |

| address of each Officer (Attach additional sheets, Please note the officer/di P = President; V= Vice Executive Officer; CFO held, President, Treasure Changes should be noted | and/or D , if necess rector titl President = Chief I or, Directo I in the fo | irector being added: ary) e by the first letter of the office title: ; T = Treasurer; S = Secretary; D = Dir Financial Officer. If an officer/director or would be PTD. Howing manner, Currently John Doe is orporation, Sally Smith is named the V | | istee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office ST and Mike Jones is listed as the V. There is would be noted as John Doe, PT as a Change, |
|---|--|---|-------------|---|
| X Change | <u>PT</u> | John Doe | | |
| X Remove | <u>V</u> | Mike Jones | | |
| X Add | <u>SV</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | | <u>Addres</u> s |
| 1) Change | VP | ABDULLA AHMED MON | PHER | 2211 AVENUE E |
| X Add | | | - | FORT PIERCE, FL 34950 |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | I | |
| Remove | | | | |
| 3) Change | | _ | <u> </u> | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | 1 | |
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| 5) Change | | | | |
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| 6) Change | | _ | | |
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| f an amendment provides for an exchange, reclassification, or | cancellation of issued shares. |
| provisions for implementing the amendment if not contained i (if not applicable, indicate N/A) | n the amendment itself: |
| (у погарисине, также гля) | |
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| The date of each amendment(s) a date this document was signed. | doption: | | , if other than the |
|---|---|--|-------------------------|
| Effective date if applicable: | | <u> </u> | |
| | (no more than 90 day | ys after amendment file date) | |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable epartment of State's records. | statutory filing requirements, this date wi | ll not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | | nber of votes cast for the amendment(s) | |
| | proved by the shareholders through reach voting group entitled to vote. | voting groups. The following statement separately on the amendment(s): | |
| "The number of votes cas | t for the amendment(s) was/were suf | fficient for approval | |
| by | · · · · · · · · · · · · · · · · · · · | | |
| | (voting group) | | |
| ☐ The amendment(s) was/were ad action was not required. | opted by the board of directors with | nout shareholder action and shareholder | |
| The amendment(s) was/were ad action was not required. | opted by the incorporators without s | shareholder action and shareholder | |
| 07/17/201 Dated_ | 7 | | |
| | | _ | |
| Signature | | <u> </u> | |
| selecte | | if directors or officers have not been ands of a receiver, trustee, or other court | |
| | SALEM QARALEH | | |
| | (Typed or printed name | e of person signing) | |
| | PRESIDENT | | |
| | (Title of pe | erson Signing) | |