P170000 40463

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATI	ON: SAFA DESIGN AN	D CONSTRUCTION, INC	<u>. </u>		
DOCUMENT NUMBER:	D17000040463				
The enclosed Articles of Articles	mendment and fee are sub	mitted for filing.			
Please return all correspond	dence concerning this matt	er to the following:			
AN.	ANJUM KHURSHID				
	Name of Contact Person				
	Firm/ Company				
100	LAKEVIEW DR., #109				
		Address			
WE	STON, FL 33326				
		City/ State and Zip Code			
NEENA.	CHURSHID@GMAIL.CO				
	E-mail address: (to be use	ed for future annual report r	notification)		
For further information con	ncerning this matter, please	e call:			
ANJUM KHURSHID		at (254-5046		
Name of Co	ontact Person	Area Coo	le & Daytime Telephone Number		
Enclosed is a check for the	following amount made p	ayable to the Florida Depar	rtment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amenda Division P.O. Bo	Address nent Section of Corporations x 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation of

SAFA DESIGN AND CONSTRUCTION, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P17000040463 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NIA (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) Florida New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

Signature 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 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Saily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
X Change	PSD	ANJUM KHURSHID	100 LAKEVIEW DR., #109
Add			WESTON, FL 33326
Remove			
2) X Change	VD	FARRUKH SAUED (SAMEED)	3107 NW 71 AVE.
Add			MARGATE, FL 33063
Remove			
3) Change			
Add			
Remove	•		
4) Change		· · · · · · · · · · · · · · · · · · ·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
MA	
	the state of the s
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
PIR	

The data of each amendment(s) a	doption:, if or	ther than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	_
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date 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 s	iopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided fo	sproved by the shareholders through voting groups. The following statement is reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
10/01/20 Dated	19	
	handi.	
(By a	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	ANJUM KHURSHID	
	(Typed or printed name of person signing)	—
	PRESIDENT, SECRETARY, DIRECTOR	
	(Title of person signing)	