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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: AVA FINANCIAL CONSULTANTS INC

Account Number : I20170000094

Phone

: (954)842-1979

Fax Number

: (954)905-4315

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN SALMA'S FOOD AND CATERING INC.

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JAN 0 7 2022

S. PRATHER

## **COVER LETTER**

TO: Amendment Section Division of Corporations

H220000078323

2/6

NAME OF CORP	ORATION: SALMA'S FOO	D AND CATERING INC	
DOCUMENT NU	MBER: P17000078326		
The enclosed Articl	es of Amendment and fee are	submitted for filing.	
	respondence concerning this n	•	
•	SALMA-MEMON	:	:
	SALMA'S FOOD AND CA	Name of Contact Person ATERING INC	on
	8557 NW 47TH STREET	Firm/ Company	
	CORAL SPRINGS, FL 330	Address	•
	AVESTA.USA@GMAIL.O	City/ State and Zip Coc	de
For further information	on concerning this matter, plea	ised for future annual report	notification)
	250	at (	688-9702
	of Contact Person or the following amount made	Area Co	de & Daytime Telephone Number
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)	Certificate of Status
Ame Divi P.O.	ling Address Indment Section Ison of Corporations Box 6327 Industrial Box 63214	Divisior The Ce 2415 N	Address ment Section n of Corporations ntre of Tallahassee . Monroe Street, Suite 810 see, FL 32303

## Articles of Amendment Articles of Incorporation H220000078323 SALMA'S FOOD AND CATERING INC (Name of Corporation as currently filed with the Florida Dept. of State) P17000078326 (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; MEMON'S FOOD & CATERING INC 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: SALMA MEMON Name of New Registered Agent **8557 NW 47TH STREET** (Florida street address) CORAL SPRINGS 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

Check if applicable

(Attach additional she Please note the officer P = President; V = Vic Executive Officer: CFO President, Treasurer, the Changes should be not a change, Mike Jones	ets, if neces /director til ce Presiden O = Chief F Director wo ted in the fo leaves the c	le by the first letter of the office title it; T= Treasurer; S= Secretary; D= Sinancial Officer, If an officer/direc	H220000078323  EDirector; TR= Trustee; C = Che tor holds more than one title, list th	urman or Clerk; CEO = Chief e first letter of each office held.
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X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u> -	Sally Smith		
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The date of ea	ch amendment(s) adoption	JANUARY 6, 2022	H220000078323	, if other than the
date this docun	nent was signed.			, n outer mais the
Effective date	if annlicable			6/ <b>6</b>
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Adoption of A	mendment(s)	(CHECK ONE)		
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☐ The amendr must be sep	nent(s) was/were approved parately provided for each	by the shareholders through voting group entitled to vote separa	ng groups. The following sta rately on the amendment(s):	atement
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		(voting group)	· ·	FIL 2022 JAN -6 SEUNETARY ALLAHASSEE
	JANUARY 6, 20	22.		AN ANS
	Dated			9.00 -6 J
	Signature Sol	na Menin		FES € □
	(By a director selected, by a	, president or other officer – if dir n incorporator – if in the hands of uciary by that fiduciary)	ectors or officers have not b a receiver, trustee, or other	en JAIN 9: court 43
	SALI	MA MEMON		•
		(Typed or printed name of p	erson signing)	
	PRES	IDENT		
		(Title of nerson signing)	<del>-</del> -	