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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RIYAN FOOD EN	TERPRISE, INC.	
	ER: P17000080288		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	REHENA HOSSAIN		
•	<del></del>	Name of Contact Person	1
	RIYAN FOOD ENTERPRIS	SE, INC.	
•		Firm/ Company	
	115 W BROAD STREET		
-		Address	
	GROVELAND, FL 34736		
•		City/ State and Zip Cod	e
riyanf	oodenterpriseine@gmail.con	1	/
	E-mail address: (to be us	sed for future annual report	
For further information	concerning this matter, pleas	se call:	
REHENA HOSSAIN		aı ( <u>407</u>	452-2825 de & Daytime Telephone Number
Name o	l'Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filling Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi: P.O.	ing Address Indian Section Indian of Corporations Indian of Corporat	Ameno Divisio Clifton	Address  Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

RIYAN FOOD ENTERPRISE, INC.		
(Name of Corporation as	currently filed with the Florida Dept. of S	tate)
P17000080288	•	
(Document N	Sumber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corpora	ation:	<b>A</b>
N/A		The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp." "In word "chartered," "professional association," or the abbre	nc," or "Co". A professional corporation	I' or the abbreviation
B. Enter new principal office address, if applicable:	N/A	.; <b>∞</b> ↑ <b>3</b>
(Principal office address MUST BE A STREET ADDRES.	<u>S</u> )	- π e
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	N/A	<u>क्रिक</u> <u>5</u>
D. If amending the registered agent and/or registered of	ffice address in Florida, enter the name of	the
new registered agent and/or the new registered office	e address:	
Name of New Registered Agent N/A		
	Florida street address)	
New Registered Office Address:	, Flor	rida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the obligations of to	he 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: <u>X</u> Change	<u>19</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	RESHADUZ S ZAMAN	5023 EDMEE CIRCLE
Add	•		ORLANDO, FL 32822
X Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	
N/A		
		<u></u> .
		<u> </u>
		<del></del>
·		
<u> </u>		
F. If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	indiment it not contained in the amendment asen:	
N/A		

·	2/2/2018	. if other than the
date this document was signed.		If other than the
02/28/2018 Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, this dat of State's records.	e will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
■ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s approval.	)
☐ The amendment(s) was/were approved by the must be separately provided for each voting	the shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by		
(ro	oring group)	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without shareholder action and shareholder	г
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder	
February 28, 2018 Dated	<del></del>	
Signature_Relien	la Hossain	
(By a director, pres selected, by an inc	sident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court by by that fiduciary)	<del></del>
REHENA	HOSSAIN	
<del></del>	(Typed or printed name of person signing)	
PRESIDEN	NT	
	(Title of person signing)	