P170000 85292

(Re	questor's Name)	
(Add	dress)	·
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





800326509728

U3/28/19--01003--012 **35.00





COVER LETTER

REPRISON NO. 3. TO: Amendment Section Division of Corporations NAME OF CORPORATION: $_^{\mathsf{SPO}}$ INC DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: GERALD S. LESHER ESQ Name of Contact Person Firm/ Company 511 S OLIVE AVE Address WEST PALM BERACH FL 33401 City/ State and Zip Code LESHERLAW@A9OL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561) 471-7155

Area Code & Daytime Telephone Number GERALD S. LESHER Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of :

SPO INC		•	
(Name	of Corporation as curren	tly filed with the Florida Dept. of Stat	<u>e</u>)
217000065292			
	(Document Number of	of Corporation (if known)	الله الله الله الله الله الله الله الله
Pursuant to the provisions of section 607, ts Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts the	following amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation nar "P.A."	or the abbreviation ne must contain the
B. Enter new principal office address,		N/A	
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			-
			_
D. If amending the registered agent ar			
new registered agent and/or the ne		<u>555:</u>	
Name of New Registered Agent	N/A		
	(Florida s	treet address)	
New Registered Office Address:	N/A	, Florida	
		(City)	(Zip Code)
		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agen	ıt·	
hereby accept the appointment as regist			osition.
· · · · · · · · · · · · · · · · · · ·	-		

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	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change	S		ABDUL MD GAFUR	626 PROSPERITY FARMS RD
Add				NPALM BEACH FL 33408
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti- (Attach additional sheets, if necessary).	(Re specific)
N/A	150 aprooping
	
	· · · · · · · · · · · · · · · · · · ·
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed. N/A	
	re than 90 days after amendment file date)
(no mor	e than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendate.	ne applicable statutory filing requirements, this date will not be listed as theorets.
Adoption of Amendment(s) (CHECK ON	
The amendment(s) was/were adopted by the shareholded by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehol must be separately provided for each voting group end	
"The number of votes cast for the amendment(s)	• •
by(voting group,	
(voting group	9
☐ The amendment(s) was/were adopted by the board of daction was not required.	lirectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporat action was not required.	tors without shareholder action and shareholder
MARCH 21, 2019 Dated	
Signature < MD. ABNU CON	in
(By a director, president or of	ther officer – if directors or officers have not been if in the hands of a receiver, trustee, or other court
ABDUL MD GAFUE	₹
(Typed or	printed name of person signing)
S	
	(Title of person signing)