

S. YOUNG

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COVER LETTER

.

TO: Amendment Section **Division of Corporations**

$\begin{array}{c} G \ 4 \ D \ TRADING \ \& \ MARKETING \ SERVICES \ INC \\ \hline \end{array}$

DOCUMENT NUMBER: <u>p</u> 18000000397

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

AHMAD AL GHAMDI

Name of Contact Person

G 4 D TRADING & MARKET SERVICES INC

Firm/ Company

4460 HODGES BLVD APT 915

Address

JACKSONVILLE, FL 32224

City/ State and Zip Code

NAGDAY@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

at (786) Area Code & Daytime Telephone Number AHAMD A AL GHAMDI Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

□ \$35 Filing Fee

S43.75 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)

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

Articles of Amendment to Articles of Incorporation of

G 4 D TRADING & MARKETING SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P18000000397

(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:

The new 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 <u>MUST BE A STREET ADDRESS</u>)		3- 00
		E B m
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6 MORGAN DR	19 ASSEE
	METHUEN, MA 01844	FLO
		RIUA RIUA

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 sweet address)
(Florida sweet address)
New Registered Office Address:
(City)
(City)
(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
Thereby accept the appointment as registered agent. T 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:

<u>X</u> Change	<u>PT</u>	John Doe			
X Remove	\underline{V}	Mike Jones			
<u>X</u> Add <u>SV</u>		Sally Smith			
<u>Type of Action</u> (Check One)	Title	Name	<u>Addres</u> s		
1) Change	VP	SAMELLE MANSOUR	4634 NORTH PARK LANE		
Add			TOLEDO, OH 43614		
X Remove					
2) Change	VP	JOSEPH S NAJJAR	6 MORGAN DR		
XAdd			METHUEN, MA 01844		
Remove					
3) Change			·······		
Add					
Remove			<u></u>		
4) Change		<u> </u>	·		
Add					
Remove					
5) Change					
Add			N		
Remove					
6) Change					
Add					
Remove					

	amending or adding additional Article mach additional sheets, if necessary).		
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		inge, reclassification, or cancellation of issued shares. dment if not contained in the amendment itself:	
Ľ	(if not applicable, indicate N/A)		

11/15/2018
The date of each amendment(s) adoption:, if other than the
date this document was signed.
. 11/15/2018 Effective date <u>if applicable</u> :
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. <i>The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):</i>
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court

(Typed or printed name of person signing)

(Title of person signing)

appointed fiduciary by that fiduciary)

PRESIDENT

AHMAD A AL GHAMDI

Signature