

TO: Amendment Section

DOCUMENT NUMBER:

RASHID AGHA

■ \$35 Filing Fee

Division of Corporations

NAME OF CORPORATION: ___LAIH CO.

SAMI A JAMHOUR

6664 NW 15TH AVE

MIAMI, FL 33147

For further information concerning this matter, please call:

Name of Contact Person

LAIH CO.

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Certificate of Status

Amendment Section
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

| | Articles of Inco | orporation | | |
|--|---|---------------------------------|---------------------------------|--------------------|
| | of | • | | |
| LAIH CO. | | : | | |
| (Name of | Corporation as currently | y filed with the | Florida Dept. of State) | |
| P18000001948 | | : | | |
| P18000001949 | (Document Number of | Composition (if | tnorm) | |
| | • | | | |
| Pursuant to the provisions of section 607.1 its Articles of Incorporation: | 006, Florida Statutes, this | Florida Profit C | orporation adopts the following | ng amendment(s) to |
| A. If amending name, enter the new par | me of the corporation: | • | | |
| AL IT MINISTER PARTY (MANAGEMENT AND ADMINISTRATION | | • | | Tt |
| | 1.4 | <u> </u> | " "incompraised" or the | _The new |
| name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat | ition "Corp," "Inc," or " | "Co". A projess | ional corporation nume must | contain the |
| word challered, projessional associa- | , | : | - | TO \$ |
| B. Enter new principal office address, i | f applicable: | <u> </u> | 1 | |
| (Principal office address MUST BE A ST | TREET ADDRESS) | | | 三三三 |
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| | | ! | | <u>νω μ</u> |
| | | : | | |
| C. Enter new mailing address, if appli | cable: | • | | 学》 第 |
| (Mailing address MAY BE A POST (| OFFICE BOX) | i ———— | | |
| | | · | <u></u> | <u> </u> |
| | | .— |] | • |
| | | | | |
| | d/an marine and affine add | tress in Florida | enter the name of the | |
| D. If amending the registered agent an new registered agent and/or the new | v revistered office addres | 11 C33 LH F 101 1011 | CALLY COOR BALLE VI SALE | |
| new respicted agencandor the ze- | SAMI A JAMHOUR | | | |
| Name of New Registered Agent | SAMI A MINOUR | | | _ |
| | 6664 NW 15TH AVE | | | _ |
| | (Florida s | trect address) | | |
| | MIAMI | ; | 33147 Florida | |
| New Registered Office Address: | | (Fibr) | | ip Code) |
| | | (City) | , , , | , |
| | | · : | | |
| | | | | |
| New Registered Agent's Signature, if e I hereby accept the appointment as regis. | hanging Registered Agentered agent. I am familian | <u>it:</u> r with and accept | the obligations of the position | 7. |
| | | | | |
| _ | | | | |
| 1 Son | Signature of New | Damietana d Accom | if changing | _ |
| | Signature of New | registerea ngen | 4. ii changing | |

____ Add

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| address of each Officer (Attach additional sheets, Please note the officer/di. P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove | and/or D if nevess rector titl President = Chief I or, Directe I in the fo wes the c | irector b ary) e by the fi ; T= Tree Financial or would i llowing m orporatio | eing added: irst letter of the office title: asurer; S= Secretary; D= Director; TR= Officer. If an officer/director holds more be PTD. canner. Currently John Doe is listed as the on, Sally Smith is named the V and S. Thes | Trustee; C = Chairman or Clerk; CEO = Chiefe than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is see should be noted as John Doe, PT as a Change, |
|--|--|---|--|--|
| Example: X Change | PT | John De | Ω c | |
| X Remove | <u>v</u> | Mike Jo | <u>ones</u> | |
| X Add | <u>şv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | <u>Title</u> | • | Name | Address |
| X Change | ďЧ | | SAMI A JAMHOUR | 6664 NW 15TH AVE |
| Add | | _ | | MIAMI, FL 33147 |
| Remove | PD | | rashid agha | 6664 NW 15TH AVE |
| 2) Change Add X | | | | MIAMI, FL 33147 |
| Remove 3)Chapge | | | | |
| Add Remove | | | | |
| 4) Change Add | | _ _ | · | |
| Remove | | | | |
| 5) Change Add | | | <u>-</u> | |
| Remove | | | | |
| 6) Change | | | | |

| amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific) | |
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| id for the second secon | and the state of transport |
| an amendment provides for an exchange, reclassification, or ca provisions for implementing the amendment if not contained in t | the amendment itself: |
| (if not applicable, indicate N/A) | |
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| Sm., dans of such accordance and a sudventions | if other than the |
|---|---|
| The date of each amendment(s) adoption:date this document was signed. | , 11 00.00 0.00 0.00 |
| Effective date if applicable: | |
| (no more than 90 days after amend | hens file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records. | g requirements, this date will not be listed as the |
| Adoption of Amendment(s) (<u>CBECK ONE</u>) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes of by the shareholders was/were sufficient for approval. | ast for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups must be separately provided for each voting group entitled to vote separately on | |
| "The number of votes east for the amendment(s) was/were sufficient for app | toval |
| by(voting group) | -" |
| The amendment(s) was/were adopted by the board of directors without shareholde action was not required. | zr action and shareholder |
| The amendment(s) was/were adopted by the incorporators without shareholder act action was not required. | tion and shareholder |
| 11/07/2018 Dated | |
| Signature A. A. | |
| (By a director, president or other officer if directors or selected, by an incorporator if in the hands of a receive appointed fiduciary by that fiduciary) | |
| RASHID AGHA | |
| (Typed or printed name of person sig | ning) |
| PD | |
| (Title of person signing) | |