P18000013366

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: LIMA CONVENIE	ENCE STORE, INC.		
DOCUMENT NUMBE	R: P18000013366			
The enclosed Articles of	"Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this mat	tter to the following:		
λ	1ST Husneara Begum			
		Name of Contact Persor	1	
t	LIMA CONVENIENCE STORE, INC.			
_		Firm/ Company		
3	3815 S MANHATTAN AVENUE			
-	Address			
ר	'AMPA, FL 33611			
_	·····	City/ State and Zip Code	•	
wasika	aymaan@gmail.com			
		sed for future annual report	notification)	
	,,	•	·	
For further information	concerning this matter, pleas	se call:		
MST Husneara Begum		813	481-3666	
Name of 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 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 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

LIMA CONVENIENC	E STORE. INC.
	(Name of Corporat

(Name e	f Corporation as curren	tly filed with the Flori	da Dept. of State)	
P18000013366				
	(Document Number	of Corporation (if know	vn)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this	s Florida Profit Corpo	ration adopts the following a	mendment(s) to
A. If amending name, enter the new na	me of the corporation:			
N/A			T	he new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." or	"Co" A professional	"incorporated" or the abbi	reviation
B. Enter new principal office address,	if amplicable:	N/A	i.a	<u></u>
(Principal office address MUST BE A S	TREET ADDRESS)	<u></u>	**	<u> </u>
				_
				<u>9</u> [
C. Enter new mailing address, if appl	<u>icable:</u>	N/A	٠ - ب	
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BON</u>)			<u></u>
D. If amending the registered agent ar	id/or registered office ad	dress in Florida, enter	the name of the	
new registered agent and/or the ne	w registered office addre	<u>881</u>		
Name of New Registered Agent	MST Husneara Begum			
	3815 S MANHATTAN	AVENUE		
	(Florida :	street address)		
New Registered Office Address:	TAMPA, FL 33611		. Florida 33611	
		(City)	(Zip Coo	de)
None Designation of Asserting Contractions of a	hanaina Dagi tayad Aga	nt.		
New Registered Agent's Signature, if a libereby accept the appointment as regis	tered agent. I am familia	r with and accept the o	bligations of the position.	
No.	r)	0		
	Signature of New	Redstered Agent, if cl	hanging	
	Signature of New	· кедімегей Адені, іf сі	unging	

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 J</u>	olm Doe	
X Remove	<u>V</u> <u>A</u>	like Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	•
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	1,	MST Husneara Begum	6120 Whiteway Drive
X Add			Temple Terrace FL 33617
Remove			····
2) Change	P	MD SHRIF MIAH	8011 TIPPERARY LANE
Add			TAMPA, FL 33610
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5/ Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Articutach additional sheets, if necessary).	(Be specific)		
	 	····	·
		<u>-</u>	
			·
			·
		<u></u>	
			<u> </u>
			
		,	. <u>.</u>
f an amendment provides for an eych	ange, reclassification, or cancellati	ion of issued shares.	
provisions for implementing the ame	dment if not contained in the ame	endment itself:	
(if not applicable, indicate N/A)			
	**		2 -

•	03/06/2018	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
	06/2018	
Effective date <u>if applicable</u> :	(no more than 90 days ofter amendment file date,)
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amoufficient for approval.	endment(s)
☐ The amendment(s) was/were a must be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	ng statement nt(s):
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	lopted by the board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and share	holder
March 06 Dated	. 2018	
selec	director, president or other officed if directors or officers have ed, by an incorporator – if in the hands of a receiver, trustee, or onted fiduciary by that fiduciary)	
	MST Husneara Begum	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	