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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: SAMIA AND RE	BA INC		
DOCUMENT NUM	MBER: P18000101190			
	es of Amendment and fee are s	ubmitted for filing.		
Please return all cor.	respondence concerning this ma	atter to the following:		
	REKHA PEDNEKAR			
		Name of Contact Perso	n	
	ACCOUNTING ADVANTA	AGE		
		Firm/ Company		
	3898 VIA POINCIANA, SU	HTE 15		
		Address		
	LAKE WORTH, FL 33467			
		City/ State and Zip Cod	e	
RPI	EDNEKAR@AACPAUSA.CO	М		
-	E-mail address: (to be u	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:at (⁵⁶¹	687-6466	
Nam	Name of Contact Person Area Code & Daytime Telephon			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing 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)	
	ailing Address		Address	
	nendment Section		Iment Section	
	vision of Corporations 3. Box 6327		on of Corporations Building	
	llahassee, FL 32314		xecutive Center Circle	
		=001 L		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SAMIA AND REBAING

2919 072 -0 (18 0, 55

	SAMIA AND RE	BA INC	2819 5	9 AM 8: 55
(<u>Name</u>	of Corporation as curren	tly filed with the F	lorida Dept. of S	itate)
	P 1800010119	0		:
	(Document Number	of Corporation (if k	nown)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Con	rporation adopts	the following amendment
. If amending name, enter the new n	ame of the corporation:			
				The new
ume must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc." or	"Co". A professio	or "incorporated nal corporation :	" or the abbreviation name must contain the
Enter new principal office address,	if applicable:	NOT APPLICA	ABLE	
Principal office address MUST BE A S		· 		· · · · · · · · · · · · · · · · · · ·
				
. Enter new mailing address, if appl	icable:	NOT APPLICA	ani r	
(Mailing address MAY BE A POST	OFFICE BOX)	NOT APPLICA	VRLE	
 If amending the registered agent are new registered agent and/or the ne 	nd/or registered office address	lress in Florida, en	ter the name of t	<u>the</u>
-	w registered office addres	<u>3.</u>		
Name of New Registered Agent				
	1047 PARK HILL DR			
		reet address)		
New Registered Office Address:	WEST PALM BEACH		Flori	33417 da
		(City)		(Zip Code)
New Registered Office Address:	(Florida st WEST PALM BEACH	reet address) (City)	Flori	da
New Registered Agent's Signature, if c	hanging Registered Agent	<u>!:</u>		
hereby accept the appointment as regist	ered agent. I am familiar	with and accept the	obligations of th	e position.
	Signature of Non-1	Registered Agent, if	ahanain-	
	organiare of trew r	юдыктей л уси і, Ц	enanging	

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 Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	S	ULLAH, REBA	44 BRITTANY A
Add			DELRAY BEACH, FL 33446
X Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
რ) Change			
Add			
Remove			

	eets, if necessary).	(Be specific)				
NOT APPLICABLE						
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If an amendment pro	ovides for an excha	nge, reclassific	ation, or cancella	ation of issued s	hares.	
provisions for imple	ementing the amend	iment if not co	ntained in the ar	nendment itself:		
(if not applicable	e, indicate N/A)					
יי זיי איזו ופפא יוין						
OT APPLICABLE				-	-	
OTATTLICABLE						
OT AFFLICABLE						
OT APPLICABLE						
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	09/01/2019	
The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	00/01/2010	
Effective date if applicable:	09/01/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	his block does not meet the applicable statutory filing requirements, this date will a Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
9/4/201 Dated	9	
Signature		
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	•
	AZADUL ISLAM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	