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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: NEBRASKA SN	S HOLDINGS, INC.		
	IBER: P19000001490			
	s of Amendment and fee are s			
Please return all corr	espondence concerning this ma	ntter to the following:		
	Tim A. Hamed			
		Name of Contact Perso	en e	
	TIM A. HAMED, CPA, P.A			
		Firm' Company	<del></del>	
	15310 Amberly Dr., Suite 2:	50		
		Address		
	Tampa, FL 33647			
	H	City' State and Zip Coc	le	
timb	amed@yahoo.com		•	
	•	sed for future annual report	(notification)	
	·	•	·	
For further information	on concerning this matter, plea	se call;		
Tim A. Hamed CPA		813	514-2905	
Name	of Contact Person	at ( 813 ) 514-2905 Area Code & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State;	
S35 Filing Fee	☐\$43.75 Filling 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, F1, 32314		Ameno Divisio	Address Iment Section on of Corporations Outling	
		2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

M	SERVE	ASKA	CNIC	HOLE	DINGS	COMP
: `	DOM:	/\		111/21	. 1. 21 . 53 . 1. 1	S DISC

( <u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of	State)
*19000001490 			
	(Document Number)	of Corporation (if known)	
tursuant to the provisions of section $607$ $s$ Articles of Incorporation:	.1006, Florida Statutes, this	<i>Florida Profit Corporation</i> adopt	s the following amendment(s)
$N/\Lambda$	ame of the corporation:		77
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	iation "Corp." "Inc." or	"Co". A professional corporation	The new ed" or the abbreviation in name must contain the
B. Enter new principal office address,	if applicable;	8251 N. NEBRASKA AVE	
Principal office address <u>MUST BE A S</u>		TAMPA, FL 33604-3105	
			2019 SEC:
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		8251 N. NEBRASKA AVE	HAY31
		TAMPA, FL 33604-3105	SSE PR
			6. 2
. If amending the registered agent an new registered agent and/or the new			F: 0
Name of New Registered Agent	BADRAN HAMMAD		
	8251 N. NEBRASKA AV	Æ	
	tFlorida st	reet address)	
New Registered Office Address:	tFlorida st		33604-3105 orida

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 Doc 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 Doc, 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	V	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
D Change	P	BADRAN HAMMAD	8251 N. NEBRASKA AVE	
X Add			TAMPA, FL 33604-3105	
Remove				
2) Change	Р	NASER KHAWAJA	9318 LISBON ST.	
Add			SEFNER, FL 33584	
X Remove				
3.) Change	VP	NASER KHAWAJA	9318 LISBON ST.	
$\frac{X}{Add}$			SEFNER, FL 33584	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change	<del></del>			
Add				
Romano				

	E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary).—(Be specific)				
VA					
				<u></u>	
				<del></del>	
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·····					
<del>-</del>		<del></del>			
<del>.</del>			·		
16	and the second		44		
If an amendment pro- provisions for imple	menting the amendm	ent if not contained	n the amendment i	<u>teg snares.</u> tself:	
(if not applicable	, indicate N/A)				
<sup>(</sup> A					
			· · · · · · · · · · · · · · · · · · ·		···-
· · · · · · · · · · · · · · · · · · ·					
	***************************************				

The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block do- document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this it of State's records.	date will not be listed as the
Adoption of Amendment(s) (	CHECK ONE)	
■ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes east for the amendme for approval.	nt(s)
	y the shareholders through voting groups. The following state ting group entitled to vote separately on the amendment(s).	ement en
"The number of votes cast for the a	mendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder	older
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder	
Dated_X	121/19	
Signature X		
(By a <del>director; ;</del> selected, by an	president or other officer – if directors or officers have not become or other education of the fine that fiduciary)	en ourt
NASEI	RKHAWAJA	
···	(Typed or printed name of person signing)	
PRESII	DENT	
	(Title of person signing)	