P19000026389

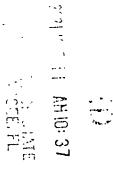
(Requestor's Name)
(Address)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Alladin Food Store	Inc			
DOCUMENT NUM	BER: p19000026389		<u> </u>		
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Alladin Food Store Inc				
		Name of Contact Person	}		
	Sumplified Bookkeeping and Tax Service Inc				
		Firm/ Company			
	2151 University Blvd S				
		Address			
	Jacksonville, Fl 32216				
		City/ State and Zip Cod	e		
	brett@isaactaxcpa.com				
	•	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Brett Isaac		at (de & Daytime Telephone Number		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Dep	artment of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Ei\$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Alladin Food Store Inc		
(Name of Corporation as currently f	iled with the Florida Dept. of State)	
P19000026389		
(Document Number of C	Corporation (if known)	·
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	orida Profit Corporation adopts the following a	inendment(s) to
A. If amending name, enter the new name of the corporation:		
Aladdin Food Store Inc	7	he new
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A proceedings of "professional association," or the abbreviation "P.A."	npany," or "incorporated" or the abbreviation	"Corp., "
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		,
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	
Name of New Registered Agent		
(Florida street	address)	,
New Registered Office Address:	, Florida	
	ity) Zip Cod	le)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

Please note the officer/director title by the first letter of the office title:

 $P = President; \ \hat{V} = Vice \ President; \ \hat{T} = Treasurer; \ So Secretary; \ D = Director, \ TR = Trustee; \ C = Chairman or Clerk; CEO = Chief Executive Officer; CFO + Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

X_Change	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			<u> </u>
Ađd			
Remove			
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
		*				
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		· · · · · · · · · · · · · · · · · · ·			·	
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		·—···				•
<u>.</u>						
If an amendme	nt provides for an ex-	change, reclassif	ication, or cane	ellation of issue	d shares,	
provisions for	implementing the an	<u>iendment if not e</u>	contained in the	amendment its	self:	
(у косаррі	licable, indicate N/A)					
					· · · · · ·	
		· · · · · · · · · · · · · · · · · · ·				
		 · -				
			<u> </u>			
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	03/16/2021	•
The date of each amendment(s) a	doption:	if other than the
date this document was signed.	170001	
Effective date <u>if applicable</u> :	16/2021	
	(no more	than 90 days after amendment file date)
Note: If the date inserted in this leadenment's effective date on the D		e applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s)	(<u>CHECK ON</u>	<u>E</u>)
■ The amendment(s) was/were ad action was not required.	opted by the incorporat	tors, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s		ers. The number of votes cast for the amendment(s)
		ders through voting groups. The following statement (itled to vote separately on the amendment(s).
"The number of votes cas	t for the amendment(s)	was/were sufficient for approval
bv		."
	(voting group)	······································
Dated Signature <u>X</u> —	3/16/2021	•
selecte	ed, by an incorporator -	her officer – if directors or officers have not been - if in the hands of a receiver, trustee, or other court
арроп	ited fiduciary by that fi	ductary)
	Dima Dawod	163
	(Typed or	printed name of person signing)
	Vice President	
	(Title of po	erson signing)