(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL.
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200335133322

10/02/19--0101/--020 **65.60

2019 0° 1' - 7 PH 3: 53

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION:JI7 INC	
DOCUMENT NUMBER: P190	000027832
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
APRIL PEACH CONDRO	ис
	Name of Contact Person
CAPE COD MGMT SVC	INC
<u> </u>	Firm/ Company
314 NE 27TH ST	1
	Address
WILTON MANORS FL	333,34-2020
	City/ State and Zip Code
APRILPEACH1@AOL.COM	
E-mail address: (to be	e use I for future annual report notification)
For further information concerning this matter, p	tease call:
APRIL PEACH CONDRON	at (954 630-8300
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee 6 Certificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

οf

JI7 INC			2.21	10p.	
(<u>Name c</u>	of Corporat	ion as currently fil	ed with the Florida Dep		 5::
P19000027832					∪ (I
	(Docu	ment Number of Co	rporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florid	a Statutes, this <i>Flo</i>	rida Profit Corporation 3	idopts the following ar	nendment(s) to
A. If amending name, enter the new na	ime of the c	 corporation:			
		1		Th	le new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Cor	." "Inc." or "Co"	. A professional corpor		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>					
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST</u>)		<u> 2X</u>			
D. If amending the registered agent an			in Florida, enter the na	me of the	
new registered agent and/or the new					
Name of New Registered Agent	JOHIRUL	ISLAM T			
	2950 SW 3	2ND AVE			
		(Florida street e	iddress)		
New Registered Office Address:	HOLLYW	doci		_, Florida	
- "		(Cit	v)	(Zip Cod	e)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			and accept the obligation	ns of the position.	
		16			
	Sig	nature of New Regi:	stered Agent, if changing		

Executive Officer: CI held. President, Treas Changes should be no	ice President FO = Chief F surer, Directo oted in the fol Avaves the co	: T= Treasurer; S inancial Officer, or would be PTD, llowing manner, G orporation, Sally &	= Secretary: D= Director If an officer/director hold furrently John Doe is listed mith is named the V and S	; TR= Trustee; C = Chairman or Clerk; CEO = Chief Is more than one title, list the first letter of each office If as the PST and Mike Jones is listed as the V. There is Is. These should be noted as John Doe, PT as a Change,
Example:				
X Change	<u>PT</u>	John Doe		
X Remove	V	Mike Jones		
X Add	<u>SV</u>	Sally Smith	1	
Type of Action (Check One)	Title	<u>Name</u>	ı	<u>Addres</u> s
1) Change	PVST	JOHIRI ———————————————————————————————————	JL ISLAM	2950 SW 32ND AVE
XAdd		ı	ı	HOLLYWOOD FL 33023
Remove				
2) Change	P	MAKSI	 IDUL ALAM	2551 NW 41ST AVE APT 210
Add				LAUDERHILL FL 33313-2772
X Remove			 	
3) Change				
Add			1 }	
Remove				
1) Change				
4) Change Add	-			
Remove				
5) Change		<u></u>		
Add				
Remove				
6) Change				
Add				
Remove				

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)

. If amending or adding additional Articles, enter (Attach additional sheets, if necessary). (Be spe	cific)
	1
	
	<u> </u>
	<u> </u>
If an amendment provides for an exchange, rec	assification, or cancellation of issued shares,
provisions for implementing the amendment if (if not applicable, indicate N/A)	not contained in the amendment itself:
	1
L SHARES OF THE CORPORATION BELONG	TO JOHIRUL ISLAM.

10/01/2019	
The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date if applicable:	
(nd more than 90 days after amendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing required document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The folemust be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
10/01/2019 Dated	
Signature	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, trusted appointed fiduciary by that fiduciary)	
MAKSUDUL ALAM	
(Type I or printed name of person signing)	
PRESIDENT	

(Title of person signing)