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COVER LETTER

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: JI7 DOCUMENT NUMBER: P1900	, INC			
DOCUMENT NUMBER: 4 1900	0021832			
The enclosed Articles of Amendment and fee are submit	itted for filing.			
Please return all correspondence concerning this matter	to the following:			
JohiruL	AS CA M Name of Contact Person			
JI7, I	NC.			
2950 S	W 32 AVE			
Holly	NC Firm/ Company W 32 AVE Address NOD FL 33023 City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
JOHIRUL ISLAM	at (786) 380 - 2445 . Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
_·				
Certificate of Status	\$43.75 Filing Fee & S52.50 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	Street Address Amendment Section Division of Corporations Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

	of		
JI7	INC		
(Name of	Corporation as currently	filed with the Floric	la Dept. of State)
PIC	1000071832	_	
	(Document Number of C	Corporation (if know	n)
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this Fi	orida Profit Corpor	ation adopts the following amendment(s) to
A. If amending name, enter the new name	ne of the corporation:		
			The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designate word "chartered," "professional association. B. Enter new principal office address, if (Principal office address MUST BE A ST	tion "Corp," "Inc," or "Con," or the abbreviation "P. applicable:	o". A professional	corporation name must contain the
C. Enter new mailing address, if application (Mailing address MAY BE A POST O		2950 S	NOOD FL 33023
D. If amending the registered agent and new registered agent and/or the new		ss in Florida, enter	the name of the
Name of New Registered Agent	JOHNOL I	SLAM	000
_	2950 S		AVE 2
	(Florida stree	t address)	27.70
New Registered Office Address:	HULLYWO	00	Florida - 336, 23
	, (6	aty)	(Zip Çode)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	MAKSUDUL ALAM	2551 NW 4184 AVE MT210 LAUDERHILL, FL 33313-2772
Add			LAUDERHILL, FL 33313-2772
2) Change	PST	JOHIRUL ISLAM	3950 SW 32 Md AVE HOWYWOOD FL 33023
Remove 3) Change			
Add Remove			
4) Change Add		-	
Remove			
5) Change			
Add			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: date this document was signed.	10/9/2019	, if other than the
date this document was signed.		· · · · · · · · · · · · · · · · · · ·
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this block does not document's effective date on the Department of	ot meet the applicable statutory filing re	
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a		for the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting		
	dment(s) was/were sufficient for approv	al
by(voti		"
(voti	ing group)	
☐ The amendment(s) was/were adopted by the taction was not required.	board of directors without shareholder a	ction and shareholder
☐ The amendment(s) was/were adopted by the i action was not required.	incorporators without shareholder action	and shareholder
Dated 10 9	•	
Signature Add	dent or other officer – if directors or off	
(By a director presi	dent or other officer - if directors or off	icers have not been
selected, by an inco	rporator - if in the hands of a receiver, t	
appointed fiduciary	by that fiduciary)	
	JOHRUL ISLAM	
	TOHRUL TSLAM Typed or printed name of person signing	y)
	PRESIDENT	
	(Title of person signing)	