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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LITTLE GIANT	T MARKET INC	•	
DOCUMENT NUMBER: P19000033150		_	
The enclosed Articles of Amendment and fee are	submitted for file	ing.	
Please return all correspondence concerning this	matter to the follo	owing:	
NAZMUL CHOWDHUR	Y		
	Name of C	ontact Perso	n
	Firm/ 6	Company	
515 PALM BEACH ROA	D		
SOUTH BAY, FL 33493	Ad	dress	
	City/ State	and Zip Cod	e
HASSOCIATESPA@GMAIL.C	ОМ		
E-mail address: (to be	used for future a	nnual report	notification)
For further information concerning this matter, pl	ease call:		
NAZMUL CHOWDHURY	at (561	541-7907
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount mac	le payable to the	Florida Depa	artment of State:
S35 Filing Fee S43.75 Filing Fee & Certificate of Status		Copy I copy is	□\$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		Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LITTLE GIANT MARKET INC.

LITTLE GIANT MARKET INC.					
(Name	of Corporation as currently	filed with the Florida Dept, of State)		
P19000033150					
	(Document Number of C	Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Fl</i>	orida Profit Corporation adopts the	following ar	nendment(s) to
A. If amending name, enter the new na	ame of the corporation:				
			Th	ie new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Co	o". A professional corporation nam	r the abbr	eviation	
B. Enter new principal office address, (Principal office address MUST BE A S					
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)			#= 12 (19 FI F	
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the name of the		# D 6: 34	
Name of New Registered Agent					
	515 PALM BEACH ROAD				
	(Florida stree	' address)			
New Registered Office Address:	SOUTH BAY	, Florida	+3493 		
	((.	ity)	(Zip Cod	e)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		h and accept the obligations of the po	osition,		
	Nazmul				
	Signature of New Reg	distered Agent, if changing			

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 = Trustce; 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	<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) X Change	PD	NAZMUL CHOWDHURY	515 PALM BEACH ROAD
Add			SOUTH BAY, FL 33493
Remove			
2) Change	P	MD A AKBAR	515 PALM BEACH ROAD
Add			SOUTH BAY, FL 33493
X Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			-
5) Change			
Add			
Remove			
6) Change			
Add			<u> </u>
Remove			
KCHIOVC			

	(Be specific)	
		_
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		_
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,	
<u>provisions for implementing the amer</u>	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
an amendment provides for an exchorovisions for implementing the amen (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
<u>provisions for implementing the amer</u>	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the document's effective date on the Department of State's records.	is 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 amendm by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes east for the amendment(s) was/were sufficient for approval	
by (voting group)	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehaction was not required.	older
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholde action was not required.	r
04/29/2019 Dated	
Signature N97MU	
(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
NAZMUL CHOWDHURY	
(Typed or printed name of person signing)	
PD	
(Title of person signing)	