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(((H19000190361 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CRICHTON MULLINGS & ASSOCIATES PA

Account Number : I20070000038 Phone

: (954)862-2250

Fax Number

: (954)862-2251

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please. Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN **NOURHAN CORPORATION**

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COVER LETTER

Division of Corporations					

Division of Corpore	шов				
NAME OF CORPORA	TION: Nourhan Corporat	ion			
DOCUMENT NUMBE			<u>. </u>		
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.			
Please return all correspo	ondence concerning this me	itter to the following:			
		Dawn Stimpson			
_	Name of Contact Person				
	Crichton Mullings CPAs PA				
_	Firm/ Company				
	3350 SW 148th Avenue Suite 203				
-	Address				
		Miramar, FL 33027			
_		City/ State and Zip Cod	<u> </u>		
	ı	dstimpson@crichtonmullin	gs.com		
-		sed for future annual report	=		
		•	,		
For further information of	oncerning this matter, plea	se call:			
Da	wn Stimpson	at (954	862 2250		
Name of	Contact Person	Area Co	do & Daytime Telephone Number		
Enclosed is a check for the	he following amount made	payable to the Florida Depa	artment of State:		
	ū				
\$35 Filing Fee	□\$43.75 Filing 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)		
Majlio	E Address	Street	Address		
Amend	Iment.Section	Amendment Section			
	on of Corporations		on of Corporations		
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle				
Tallahassee, FL 32314 2661 Executive Center Circle					

Taliahassee: FL 32301

Articles of Amendment to Articles of Incorporation of

	of	- Po. 2000				
	Nourhan Cor	poration				
(Name of Corp	oration as currently	filed with the Florida	Dept. of State)		
	P190000	37371				
(D	Occument Number of (Corporation (if known)				
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this F	Torida Profit Corporati	on adopts the f	ollowing a	nendmer	ıt(s) to
A. If smending name, enter the new name of t	he corporation:					
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered, ""professional association," o	Corp," "Inc," or "C	o". A professional co	corporated" of rporation name	the abbr	e new- eviation iain the	
B. Enter new principal office address, if application of the address MUST BE A STREET						
				(20/9	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)				Σ:: <u>-</u>	ا
·						
D. If amending the registered agent and/or re- new registered agent and/or the new regist		ss in Florida, enter the	e name of the		M 9: 32	_
Name of New Registered Agent						
	(Florida stree	et address)		 -		
New Registered Office Address:			Florida <u>.</u>			
	(6	City)		(Zip Cod	e)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		ith and accept the oblig	ations of the po	sition.		
	Signature of New Re	gistered Agent, if chang	ring			

Example:

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.

X Change	PT	John Do	e	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
_X Add	S Y	Sally Sn	aith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	D		Samia Shaaban Alameldin Hussein	3350 SW 148th Avenue
Add				Suite 203
Remove				Miramer FL 33027
2) Change	D		Alameldin Hussein	3350 SW 148th Avenue
Add				Suite 203
X Remove				Miramar
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
			•	
δ) Change		_		
Add				
Remove				

(Attach additional sheets, if necessary). (Be specific)
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
· · · · · · · · · · · · · · · · · · ·

The date of each amendment(s) ado date this document was signed.	ption:	
Effective date if applicable:		
	(no more than 90 days aft	er amendment file date)
Note: If the date inserted in this blo document's effective date on the Department.		story filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suffi		of votes cast for the amendment(s)
☐ The amendment(s) was/were appro- must be separately provided for ea	oved by the shareholders through voting ach voting group entitled to vote separ	
"The number of votes cast fo	r the amendment(s) was/were sufficient	nt for approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	red by the board of directors without s	hareholder action and shareholder
The amendment(s) was/were adopt action was not required.	ted by the incorporators without share	nolder action and shareholder
Dated 6/18	1 2019	
Signature	2019 Ottimpson	
(By a dire selected,	ector, president or other officer – if die by an incorporator – if in the hands of d fiduciary by that fiduciary)	
	Dawn Stim	pson
	(Typed or printed name of p	erson signing)
	Incorporat	or
_	(Title of person	signing)