P19000052827

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COVER LETTER

TO: Amendment Section Division of Corporations	,	
NAME OF CORPORATION: RYAN MART IN	4C	
DOCUMENT NUMBER: P19000052827	·	
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
SHAHRIAR HASAN		
	Name of Contact Pers	on
. ————————————————————————————————————	Fitm/ Company	
1601 NW 108TH AVE APT	111	
	Address	
PLANTATION FL 33322		
	City/ State and Zip Cod	de
P mail address (a. I.	10	
E-man andress: (to be in	sed for future annual repor	t notification)
For further information concerning this matter, pleas	se call:	
Shahriar hasan		
	et (⁹⁵⁴) 993-2071
Name of Contact Person	Area Co	ede & Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Depa	artment of State:
\$35 Filing Fee	U\$43.75 Filling 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	Amend Divisio Clifton	Address ment Section n of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

RYAN MART, INC.		
(Name of Cor	rporation as currently filed with the Florida Dept. of State)	
P19000052827	· · · · · · · · · · · · · · · · · · ·	
((Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," (te word "corporation," "company," or "incorporated" or "Corp," "Inc," or "Co". A professional corporation name or the abbreviation "P.A."	the abbreviation must contain the
B. Enter new principal office address, if appl	licable.	
(Principal office address MUST BE A STREET	TADDRESS)	
Enter new mailing address, thapplicable:		
(Mailing address MAY BE A POST OFFIC	<u>E BOX</u>)	
		<u> </u>
). If amending the registered agent and/or re-	gistered office address in Florida, enter the name of the	90
new registered agent and/or the new registe	ered office address:	
Name of New Registered Agent		ं ं
		 -:
	(Floridu street address)	<u> </u>
New Registered Office Address:		Ē.
Hen Registered Office Address:		
	Tedy	(Zip Code)
ew Registered Agent's Signature, if changing	Registered Agent:	
nereby accept the appointment as registered age.	nt. I am familiar with and accept the obligations of the positi	Qn.
	Signature of New Registered Agent, if changing	
	resource of their negionered Agent, it 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 = 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	FI	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
\underline{X} Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u>VP</u>	ALAM M MOHAMMED	12345 NW 1ST STREET
Add			PLANTATION FL 33325
X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			\
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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Attach additional at	ng additional Arti	(P	<u> 197-1-1- 9</u> .		
Attach additional sh	eis, ij necessary).	· (Be specific)			
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an amenoment pro	vides for an excha	nge, reclassificati	on, or cancellation of	issued shares,	
(if not applicable	indicate N/4)	imentit not conti	ulned in the amendme	nt itself:	
(,/	, maicute 1974)				
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:	TOBER 1, 2019	no more than 90 days after amendment tile date)
	ļ	no more than 90 days after amendment file, date)
Note: If the date inserted in this document's effective date on the D	block does not epartment of Sta	meet the applicable statutory filing requirements, this date will not be listed as the attempt of the listed as the statutory filing requirements.
Adoption of Amendment(s)	(<u>Che</u> c	K ONE)
The amendment(s) was/were ad by the shareholders was/were so	opted by the sha officient for app.	reholders. The number of votes east for the amendment(s) roval.
The amendment(s) was/were ap must be separately provided for	proved by the st each voting gro	areholders through voting groups. The following statement output entitled to vote separately on the amendment(s):
"The number of votes cast	for the amends:	 lent(s) was/were sufficient for approval
by		:13
· — —	(voting	group)
The amendment(s) was/were addaction was not required.	pted by the boa	rd of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	pted by the inc	rmorators without shareholder action and shareholder
Dated	6/2e	19
Signature 🔏	ي	34-man
(By a d	rector, presiden	t or other officer - if directors or officers have not been
selectei appoint	, by an incorpo ed fiduciary by	rator – if in the hands of a receiver, trustee, or other court that fiduciary)
	SHAHRJAR S	
	(Тур	ed or printed name of person signing)
	PRESIDENT	
		(Title of person signing)
;		