Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MOSTAFA HOSSAIN Account Number : I20190000040 Phone : (302)761-0181 Fax Number : (305)570-1727

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN EZ MOBILE INC.

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Help

TO: Amendment Section

Division of Corporations

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COVER LETTER

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NAME OF CORPORATION: EZMObile Tuc.				
DOCUMENT NUMBER: P 1900055350				
DOCUMENT NUMBER: P (9/OCC) 5 5 5 0				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
SHAHINY SHAHIN				
Name of Contact Person				
EZ MOBILE INC.				
Firm/ Company				
12.15 SUNSET STRIP				
Address				
SUNRISE, FL 33313				
City/ State and Zip Code				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				

2

SHAILIN Y. SHAHIN at (786) 343-6039

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

🔯 \$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)

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 Articles of Incorporation

om: Mostala Hossain	Fax: 13055701727	To:	Fax: (850) 617-6380	Page: 3 of 6	07/25/2019 3:15 PM
			Amendment to		
			ncorporation of	· 4	题。"是一个
EZ M	OBILE	INC.	ntly filed with the Florida Dept.		200
A	(Name of C	orporation as curre	ntly filed with the Florida Dept. o	of State)	3
P19000	055350	2	of Corporation (if known)		
		(Document Number	of Corporation (if known)		(B) 1
Pursuant to the provis ts Articles of Incorpo		6, Florida Statutes, th	is Florida Profit Corporation ado	pts the following am	endment(s) to
A. If amending nam	ie, enter the new name	of the corporation:			
				The	e new
"Corp.," "Inc.," or		on "Corp," "Inc," of	tion." "company." or "incorpore r "Co". A professional corporati n "P.A."		
3. Enter new princi	ipal office address, if u tress <u>MUST BE A STR</u>	pplicable: EET ADDRESS)	1215 SUNSE		
			SUNRISE, F	<u>L 333 (3</u>	
					<u></u>
	ing address, if applicat MAY BE A POST OF		1215 SUNS		
			SUNPISE,	FL 333	<u>. C</u>
					
	registered agent and/o gent and/or the new r		ddress in Florida, enter the name ess:	of the	
<u>Name of Ne</u>	w Registered Agent			·	
		(Florida	street address)		
Van Pagista	red Office Address:			Florida	
<u> New Registe</u>	rea Office Autiress.		(City)	· torida(Zip Gode)
New Registered Age hereby accept the a	ent's Signature, if char ppointment as registere	iging Registered Ago d agent, I am familio	nt: ir with and accept the obligations of	of the position.	
,				<u>, </u>	

Signature of New Registered Agent, if changing

From: Mostafa Hossain Fax: 13055701727 To: Fax: (850) 617-6380 Page: 4 of 6 07/25/2019 3:15 PM

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	<u>PT</u>	John Do	<u>c</u>	
X Remove	$\underline{\mathbf{y}}$	Mike Jo	<u>dez</u>	
<u>X</u> Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1)Change		_		
Add				- Control of the cont
Remove				
2) Change				
Add				
Remove				
3)Change		-	····	
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	-7-11-1	_		-
Add				
Remove				
6) Change				
Add				
Remove				

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I amending or adding additional Arti Attach additional sheets, if necessary).	icles, enter change(s) here: (Respective)
Attacti unanionai sneets, ty meessury).	(ne specific)
	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ad late this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bidocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date with partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 7/2	5/2019 M	
Signature	EL/	
(By a di	rector, president or other officer - if directors or officers have not been	P
	t, by an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Shahin Shahin	
	(Typed or printed name of person signing)	
	P1)	
•	(Title of person signing)	

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From: Mostafa Hossain Fax: 13055701727