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Division of Corporations

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Account Name : AJ ACCOUNTING SERVICES, INC.

Account Number : I20110000092 Phone : (305)448-9584 Fax Number : (305)448-9569

**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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AYMAN INC.	

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COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corp	porations		
NAME OF CORPO	RATION: AYMAN INC.		
	BER: P19000063490		
	of Amendment and fee are s	ubmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	PINKU DEBNATH		
	·	Name of Contact Perso	en .
	AYMAN INC.		•
		Firm/ Company	
	1960 OPA LOCKA BLVD		
		Address	
	OPA LOCKA, FL 33054		
		City/ State and Zip Coo	le
		sed for future annual report	notification)
For further informatio	n concerning this matter, plea-	se call:	
PINKU DEBNATH		at (907-2682
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 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			Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

YMAN INC.	2813 SEP - 9 P 1: 22
(Name of Corporati	ion as currently filed with the Florida Dept. of State).
19000063490	TALLAHASSEL FEORIDA
(Docur	ment Number of Corporation (if known)
arsuant to the provisions of section 607.1006, Florid Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment
If amending name, enter the new name of the co	prporation;
	The new
me must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abbreviation o," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
Enter new principal office address, if applicable trincipal office address MUST BE A STREET ADD	
<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	NV.
(Making address MAT BE A POST OFFICE BO	<u> </u>
	·
If amending the registered agent and/or register	
If amending the registered agent and/or registered new registered agent and/or the new registered	
new registered agent and/or the new registered	
new registered agent and/or the new registered	office address:
new registered agent and/or the new registered	office address:
new registered agent and/or the new registered	office address:

Signature of New Registered 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 = 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	ABU HOQUE	1960 OPA LOCKA BLVD
Add Remove	-		OPA LOCKA, FL 33054
2) Change		<u> </u>	
Kemove			
3) Change			
Remove 4) Change		_	
Add			
5) Change			
Remove			
6) Change			
Remove			

	(Be specific)			
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The dear of each annual and on the same	9/6/19	ie ala ala ala
The date of each amendment(s) ad late this document was signed.	option: tt t	if other than the
Effective date <u>if applicable</u> :		·
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date wipartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	
The amendment(s) was/were adoption was not required.	oted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators without shareholder action and shareholder	
Dated 9161	19	
Dared 9(4) Signature	Inla Debrath	
(By a di selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	PINKU DEBNATH	
•	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of nerson signing)	