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COVER LETTER

TO: Amendment Section Division of Corporations HAMDELA INTERNATIONAL CORP NAME OF CORPORATION: P19000067428 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SEMIR NOUATHED Name of Contact Person HAMDELA INTERNATIONAL CORP Firm/ Company 13741 SW 100 TER Address MIAMLEL 33186 City/ State and Zip Code JACP2002@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (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 to Articles of Incorporation of

HAMDELLA INTERNATIONAL CORP

(Name of Corporation as e P19000067428	currently filed with the Florida Dept. of State)
(Document N	lumber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ites, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corpora	ation:
	The new prporation," "company," or "incorporated" or the abbreviation as," or "Co". A professional corporation name must contain the existion "P.4."
	13741 SW 100 TER
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u>S</u>) MIAMI FL 33186
•	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13741 SW 100 TER
(Maning dauress MAT DE ATOST OFFICE BOX)	MIAMI FI. 33186
	C
D. 16	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	
(Fi	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
hereby accept the appointment as registered agent. I am fo	amiliar with and accept the obligations of the position.
Signature o	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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	SCR	JAVIER MAKSO	13741 SW 100 TER
Add			MIAMI FL 33186
X Remove			
2) Change		_	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		- ·-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

If amending or adding additional A (Attach additional sheets, if necessary	s). (Be specific)			
				
	 			
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If an amendment provides for an ex-	xchange, reclassification,	or cancellation of is	sued shares,	
provisions for implementing the ar	mendment if not containe	d in the amendment	<u>itself:</u>	
(if not applicable, indicate N/A))			
			· ·	
		-		
				<u>, , , , ,</u>

The date of each amendment(s) adopt date this document was signed.	otion:	, if other than th
10/01/2	2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this date vitment of State's records.	vill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
	red by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	d by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were adopted action was not required.	d by the incorporators without shareholder action and shareholder	
Dated 10 0 19	1	
Signature		
(By a direct selected by	etor 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 fiduciary by that fiduciary)	
_	(Typed or printed name of person signing)	buarhed
_ 	(Title of person signing)	***