P190000 94221

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: K.C.Z Housing Co.	rp	
	BER: P19000094227		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Shaukat Zia		
		Name of Contact Persor	1
	K.C.Z Housing Corp		
		Firm' Company	
	3912 S congress Ave		
		Address	
	Lake Worth FL 33461		
		City/ State and Zip Code	
shaul	catzia <i>ra</i> gmail.com		
	E-mail address; (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas		
Shoukat Zia		561	214-1491
Name	of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	atment of State;
S35 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)
Air Div P.C	iling Address endment Section usion of Corporations b. Box 6327 lahassec, FL 32314	Amend Divisio The Co 2415 ?	Address Iment Section on of Corporations centre of Tallahassee 8. Monroe Street, Suite 810 pssee, FL 32303

Articles of Amendment Articles of Incorporation

of K.C.Z Housing Corp

(Name of Corporation as currently fi	led with the Florida Dept. of State)	2020.12 P
1219000094227		ζ. F.
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	rida Profit Corporation adopts the follo	wing amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "com "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pr "chartered," "professional association," or the abbreviation "P.A."	pany," or "incorporated" or the abbrev ofessional corporation name must co-	iation "Corp.," ntain the word
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
		-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
_		
 If amending the registered agent and/or registered office address new registered agent and/or the new registered office address; 	in Florida, enter the name of the	
None of None Businesses I to our		
Name of New Registered Agent		
(Florida street	address)	
New Registered Office Address:	, Florida,	Zip Code)
		•
New Registered Agent's Signature, if changing Registered Agent:		
Thereby accept the appointment as registered agent. I am familiar with	and accept the obligations of the position	on
Signature of New Regi	stered 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, \hat{V} - Vice President, \hat{T} - Treasurer; S = Secretary, D \Rightarrow Director; TR = Trustee; C = Chairman or Clerk; CEO + Chief Executive Officer; CEO + 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	<u>P.F.</u>	<u>John Doe</u>	
X Remove	7.	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Shahiahan Daud Afoo	3912 S Congress Ave
X Add			Lake Worth FL 33461
Remove		·	
2) Change			
Add			
Remove 3.1 Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
F. If amending or additional sh	ing addit ects, if ne	ional Articles, enter change(s) here: cessary) — (Be specific)	

•		
tif not applicable, indicate N/A)	nent if not contained in the amendment itself:	
	Page 3 of 4	
The date of each amendment(s) adoption:date this document was signed.		than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopte by the shareholders was/were suffice	I by the shareholders. The number of votes east for the amendment(s) ent for approval.
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s).
"The number of votes east for	the amendment(s) was/were sufficient for approval
by	······································
	(voting group)
. The amendment(s) was/were adopte action was not required.	I by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopte action was not required.	by the incorporators without shareholder action and shareholder
Dated	
Signature	Should keer
selected, b	or, president or other officer—if directors or officers have not been an incorporator—if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
h Sk	ukat Zia SHAUKAT ZIA.
	(Typed or printed name of person signing)
7/1	

(Title of person signing)