## P20000035308

(Re	equestor's Name)	
(A	ddress)	
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	it (Ct-t-17:-(Dt	- 40
(C	ity/State/Zip/Phone	e #)
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(D	ocument Number)	
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## COVER LETTER ...

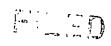
TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Wajid Inc			
DOCUMENT NUN	P20000035308			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	nter to the following:		
	Wajid Ghaniwala			
	Name of Contact Person			
		Firm/ Company		
	10261 SW 13 Street			
		Address		
	Pembroke Pines, FL 33025			
		City/ State and Zip Code	e	
	wghaniwala@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call:		
Wajid Ghaniwala		954 at (	600 - 6432	
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Address	
		Amendment Section Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32303

## Articles of Amendment

to Articles of Incorporation of



Wajid Inc	2022 APR 15 AM 8:-13
(Name of Corporation as cu	rrently med with the riorida Dept. or State)
P20000035308	THE SERVICE
(Document Nun	mber of Corporation (if known)
Pursuant to the provisions of section 607,1006. Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporati	on:
Wajid Consulting Inc	The new
	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
	-
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac	
Name of New Registered Agent N/A	
Name of Sen registered agent	
	rida street address)
N/A	N/A
New Registered Office Address:	(City) Florida (Zip Code)
	•
New Registered Agent's Signature, if changing Registered a	Agent:
I hereby accept the appointment as registered agent. I am fan	niliar with and accept the obligations of the position.
Signature of )	New Registered Agent, if changing

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

tAttach 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>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

. <u>11 amend</u> (Attach <i>a</i>	fing or adding addit additional sheets, if ne	essary). (Be spe	er change(s) nei voitie)	<u>.c</u> .		
!/A						
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lf an am	endment provides fo	r an exchange, re	elassification, o	r cancellation of	issued shares.	
provisi	ons for implementing	the amendment	if not contained	in the amendmo	ent itself:	
(if)	not applicable, indica	'e N/A)				
			<del></del> :			
/A						
				<del></del>		
					_	
		<del></del> -			<del></del> .	

The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amer afficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by N/A	<del>.</del>	
	(voting group)	
(By a c selecte	firetor, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or officed fiduciary by that fiduciary)	
	Wajid Ghaniwala	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	