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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: PALAFOX QUIC	K STOP, INC		
DOCUMENT NUN	D00000066404			
The enclosed Article	s of Amendment and fee are su	abmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	RAYHAN UDDIN			
		Name of Contact Person	1	
	PALAFOX QUICK STOP, I	NC		
		Firm/ Company		
	5836 LAST BIG TREE LN			
		Address		
	PENSACOLA, FL 32505			
		City/ State and Zip Cod	e	
	RAYHAN5997@GMAIL.CO	OM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, plea	se call: at (⁸⁵⁰	_) 288 1627	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	☐S43.75 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		Street Address Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
i ai	lahassee, FL 32314	2415 8	J. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

PAT	AFC	'nΧ	OH	ICK.	STOF	INC

(Name of Corporation as cur	rently filed with the Florida De	pt. of State)
P20000055424		
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes. ts Articles of Incorporation:	, this Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	n:	
		The new
name must be distinguishable and contain the word "corporation". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "	". A professional corporation	
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRESS</u>)		2020
	 	
		1
Enter new mailing address, if applicable:		ည်
(Mailing address MAY BE A POST OFFICE BOX)		
		بِ ا
		े जु
. If amending the registered agent and/or registered office	address in Florida, enter the na	ame of the
new registered agent and/or the new registered office ad-		
Name of New Registered Agent		
	·	
(Flori	da street address)	
No. 20. 14. 1000 411		471
New Registered Office Address:	(City)	, Florida (Zip Code)
		(inp 4 ins)
ew Registered Agent's Signature, if changing Registered A	gent:	
hereby accept the appointment as registered agent. I am fami	liar with and accept the obligatio	ns of the position.
Signature of N	ew Registered Agent, if changing	<u> </u>
Signature of N	ст педіметей лідені, іј спандінд	
heck if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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:

(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; CE() = Chief Executive Officer; CF() = 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>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	VP	MD R ISLAM	8501 FOXTAIL LOOP
Add			PENSACOLA
X Remove			FL 32526
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 Arti (Attach additional sheets, if necessary).	(Be specific)
·	
If an amendment provides for an eyeb	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ў пог аррасате, тасате хүл)	

• •	7/30/2020	
The date of each amendment(s):		, if other than the
date this document was signed.		
	0/2020	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without shareholder actio	n and shareholder
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.)
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
bv		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
7/30/2020		
Dated		
Signature /	<u>'/</u>	
selecti	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ited fiduciary by that fiduciary)	
	RAYHAN UDDIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	