P2000069848

(Requestor's Name)			
(Address)			
(Address)			
,			
(City/State/Zip/Phone #)			
(engletiator Elph Notice II)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Octanics depics			
<u></u>			
Special Instructions to Filing Officer:			





100408455041

05/15/23--01029--003 -+43.75

SECRETARY OF STATE
TALLAHASSEE FI

ML

COVER LETTER

TO: Amendment Section Division of Corporati	ions	
NAME OF CORPORAT	D7 DAKAA/9848	 -
The enclosed Articles of A	Amendment and fee are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
	Ekramul Hussain	
	Name of Contact Person	
	Firm/ Company	
	1626 Shaker Circle	
	Wellington Florida 33414 City/ State and Zip Code	_
		.
	Seser72 @ yahoo.com	
	E-mail address: (to be used for future annual report notification)	
For further information co	encerning this matter, please call:	5. 78. S. 78.
Ekramul Hus	at (5 0 1) 3 (1 , 7)	SECRE FALL MILES
Name of Co	fontact Person Area Code & Daytime Telephone Nu	mber 3 5
Enclosed is a check for the	e following amount made payable to the Florida Department of State:	SAC P
□ \$35 Filing Fee	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)	SECRETALLANDESEE, FL
Amendn Division P.O. Bos	Address nent Section of Corporations x 6327 Ssee, FL 32314 Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 81 Tallahassee, FL 32303	0

Articles of Amendment

to

Articles of Incorporation

Rat Discount 1	Food Mart of I	-^C.		
	Corporation as currently file	d with the Florida De	pt. of State)	
P20000069848				
	(Document Number of Cor	poration (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this <i>Flori</i>	da Profit Corporation	adopts the following	amendment(s) to
A. If amending name, enter the new nam	e of the corporation:			
				The new
name must be distinguishable and contain th "Inc.," or Co.," or the designation "Cor" "chartered," "professional association," or	p," "Inc," or "Co". A pro			
B. Enter new principal office address, if				
(Principal office address <u>MUST BE A STR</u>	REET ADDRESS)			
	_			
	_			
C. Enter new mailing address, if applica	ble:			
(Mailing address <u>MAY BE A POST OF</u>	FFICE BOX)			
				
	_			
D. If amending the registered agent and/	or registered office address i	n Florida enter the n	ame of the	
new registered agent and/or the new r		n riorida, enter the il	ame of the	- 3
Name of New Registered Agent	Etramul Hus	sain		2023 SEC
	2300 Ave 6			SECRETAIN 15
-	(Florida street ad			圣圣 古
New Registered Office Address:	Riviera Beach	^	. Florida 334	여는 '-
Www. Negastered Vijnet Address.	(City,)	Zip Co	ndej ()
				THE O
New Registered Agent's Signature, if cha I hereby accept the appointment as registere		and accept the obligation	ons of the position.	
	Ham H		, ,	
	Signature of New Regist	ered Agent, if changing	<u> </u>	

Check if applicable

☐ 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:

(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>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change	<u>Title</u>	Rang, MD Sohel	Address
Add Remove 2) Change Add	P	Hussain, Ekramul	1626 Shoker Circle Wellington, FL 33414
Remove Change			
Add Remove 4) Change Add			SECRETA N TALLAHA
Remove 5) Change Add			
Remove 6) Change Add			

(Attach additional sheets, if necessary). (Be specific)	
	•
	
· · · · · · · · · · · · · · · · · · ·	
	·
f an amendment provides for an exchange, reclassification, or cancell provisions for implementing the amendment if not contained in the a	lation of issued shares, mendment itself:
(if not applicable, indicate N/A)	
	- -
	ALLAN
	<u> </u>
	į.

2023 MAY 15 PH 3: 15

The date of each amendment(s) adoption:	May 4, 2023	, if other than the
date this document was signed. Effective date if applicable:	May 4, 2023 (no more than 90 days after amena	lment file date)
Note: If the date inserted in this block does document's effective date on the Department		ng requirements, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
☐ The amendment(s) was/were adopted by the action was not required.	he incorporators, or board of directors v	vithout shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes or approval.	east for the amendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each voti		
"The number of votes cast for the an	nendment(s) was/were sufficient for ap	proval
by		"
(1	voting group)	
Dated May 4.	2023	
(By a director, pr selected, by an ir	resident or other officer – if directors or necorporator – if in the hands of a receiv ary by that fiduciary)	
<u> </u>	(Typed or printed name of person sig	
ĺ	(Typed or printed name of person sig	ning)
	President	
	(Title of person signing)	

2023 MAY 15 PH 3: 15
SECRETANT OF STATE
TALLAHASSEE, FL