P20000078616

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COVER LETTER

TO: Amendment Section Division of Corporations

	RPORATION: CLEAGER 1, III	<u>c.</u>	
DOCUMENT N	NUMBER: P20000078616	200000	78616
The enclosed Ar	ticles of Amendment and fee are s	submitted for filing.	_
Please return all	correspondence concerning this m	natter to the following:	
	Omar Saleh		
		Name of Contact Perso	n
	FLORIDA LEGAL CONSU	Л.TING, P.A.	
		Firm/ Company	
	9000 NW 44th Street, Ste. 2	20	
		Address	-
	Sunrise, FL 33351		
		City/ State and Zip Cod	e
	osaleh@floridalegalconsulti	me com	
		-0	
	E-mail address: (to be t	used for future annual report	notification)
	E-mail address: (to be t	used for future annual report	notification)
For further infor	E-mail address: (to be to mation concerning this matter, ple	·	notification)
For further inford		ase call:	305-5454
Omar Saleh		ase call:at (,
Omar Saleh	mation concerning this matter, ple	ase call: at (Area Co	305-5454 de & Daytime Telephone Number
Omar Saleh	mation concerning this matter, pleadame of Contact Person	ase call: at (Area Co	305-5454 de & Daytime Telephone Number

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	n as currently filed with the Florida Dept. of State)
P20000078616	
(Docume	ent Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:
	The new
name must be distinguishable and contain the word "cor, "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word iation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	1023 pc. 1 2
D. If amending the registered agent and/or registere	d office address in Florida, enter the name of the
new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City), Florida
	тену) (пр сове)
New Registered Agent's Signature, if changing Regis	tered Agent:
I hereby accept the appointment as registered agent. I c	am familiar with and accept the obligations of the position.
Signati	ure of New Registered Agent if changing

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.

Example:

X_Change	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	VP	JORGE GHIGLION	NE	21331 SW 246 Street
X Add				Homestead, FL 33031
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
5) Change				
Add	_			
Remove				

	or adding additional Art onal sheets, if necessary).	(Be specific)			
					
		 _			
				•	
					
		-			
_		-			
			-		
f an amendo	ent provides for an exc	hange, reclassifica	tion, or cancellation	n of issued shares,	
<u>provisions f</u>	r implementing the amo	endment if not con	tained in the amen	dment itself:	
	plicable, indicate N/A)				
(if not ap					
(if not ap					
(if not a _l					
(if not a _l					
(if not a _l			-		
(if not ap					
(if not ap					
(if not ap					
(if not ap			-		
(if not ap			_		
(if not ap					
(if not ap					
(if not ap					

The date of each amendment(s) ado date this document was signed.	ption;	, if other tha
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	-
	, ,	
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):	
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
August 8, 202	3	
Dated		
Signature •		
(By a dire	ctor, precident or other officer - if directors or officers have not been	
	by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
	TUSABE ALHOMSI	
_	(Typed or printed name of person signing)	
Pf	RESIDENT	
	(Title of person signing)	

the

the