PZO 0000 96749

(Requestor's Name)	
(Address)	900356803
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(City/State/Zip/Phone #)	
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(Business Entity Name)	12/29/2001003
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SLEIMAN CORP		
	BER: P20000096749		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	ADRIANA ARMOA		
		Name of Contact Person	1
		Firm/ Company	
	11013 NW 30 Street Ste 115		
		Address	
	Miami, FL 33172		
		City/ State and Zip Cod	e
	ulitala@me.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas		793-5157
Name of Contact Person		at (at () 793-5157 de & Daytime Telephone Number
	or the following amount made		
S35 Filling 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		Amend Division The C 2415?	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite \$10

Articles of Amendment to Articles of Incorporation of

CI	CIT	V.F 1	· 🔨	CC	DD

(Name o	of Corporation as currently	filed with the Florida Dept. of State)	
P20000096749			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
XSLEIMAN CORP.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviate professional corporation name must conta	ion "Corp.," in the word
B. Enter new principal office address. (Principal office address MUST BE A S		11013 N W 30 Street Ste 115., Miami, FL	33172
			<u>.</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11013 N W 30 Street Ste 115., Miami, FL	33172
			
D. If amending the registered agent an		ess in Florida, enter the name of the	P
new registered agent and/or the new	w registered office address:		==
Name of New Registered Agent	N/A		- 2
			27
	/Florida stre	et address)	_
New Registered Office Address:		, Florida	
	!	City) (Zip	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of the position.	
	Signature of New Re	gistered 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)

Example:

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	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Acd			
Kemove			
5/Cannge			
Remove			
6) C			
Acc			
Remove			

.3	dditional sheets, if	· · · · · · · · · · · · · · · · · · ·	g specific)				
A							
							
· · ·							
							
·							
	 						
					-		
If an am	endment provides	for an exchange	- reclassificatio	on or cancella	tion of issued sh	iares	
provisio	ons for implement	ing the amendm	ent if not conta	ined in the am	endment itself:		
(if r	101 applicable, îndi	cate N/A)					
Α							
						-	
							
							
							-
							

The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable:	December 17, 2020	
internet date in appreciant	(no more than 90 days after amendment file date)	
	is block does not meet the applicable statutory filing requirements: Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☑ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were by the shareholders was wer	adopted by the shareholders. The number of votes east for the ame e sufficient for approval.	endment(s)
	approved by the shareholders through voting groups. The followin for each voting group entitled to vote separately on the amendmen	
"The number of votes	east for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
Decem Dated Signature	Aduana Homoal	
(18y selo	a director president or other officer – if directors or officers have rected, by an incorporator – if in the hands of a receiver, trustee, or objected fiduciary by that fiduciary)	
	ADRIANA ARMOA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	