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COR AMND/RESTATE/CORRECT OR O/D RESIGN BLUE HERON KWIK STOP, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: BLUE HERON KW	VIK STOP, INC.				
DOCUMENT NUM	1BER: P21000010190					
	es of Amendment and fee are sub	mitted for filing.				
Please return all cori	respondence concerning this mat	ter to the following:			•	
	MOHAMMED M HOSSAIN					
		Name of Contact Person				
	BLUE HERON KWIK STOP	, INC.				
		Firm/ Company		_		
	101 W LUE HERON BLVD					
		Address		_		
	RIVIERA BEACH, FL 33404					
		City/ State and Zip Code			2	
	KWIKSTOP5401@GMAIL.COM		**** ** *	022 S		
	E-mail address: (to be us	ed for future annual report	notification)	17	ÉP 2	1 ACC
For further informa	tion concerning this matter, pleas	e call:		ESSVECT 1	2022 SEP 22 AM 10:	71
MOHAMMED HOSSAINat (954696-2400			10: 2	C		
Name of Contact Person Ar		Area Co	de & Daytime Telephone Nur	nber -	25	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:			
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
D	Mailing Address		Address			
	Amendment Section Amendment Section					
Division of Compressions						

Amendment Section
Division of Corporations
P.O. Box 6327
Tollahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BLUE HERON KWIK STOP, INC.			
(Name of Corporation as currently	filed with the Florida Dept. of State)	_	
P21000010190			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this lits Articles of Incorporation:	Florida Profit Corporation adopts the follow	ving amendm	ent(s) to
A. If amending name, enter the new name of the corporation:			
		The nev	
name must be distinguishable and contain the word "corporation," "continuing or Co." or the designation "Corp," "Inc." or "Co". A "churtered," "professional association," or the abbreviation "P.A."	l professional corporation name must con	ation "Corp., tain the wor	 d
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			
		2 02:	
		2	"一
C. Enter new mailing address, if applicable:	25	ارط 2 :	enstrar a
(Mailing address MAY BE A POST OFFICE BOX)			j Jerjenj
		<u> </u>	9 0 0
		<u>. 5</u>	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the name of the	25	
Name of New Registered Agent			
Hame of Her Negationed Head			
(Florida st	reet address)		
New Registered Office Address:	, Florida		_
New Regulered Office Haureni.	(City)	Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position Registered Agent, if changing	on.	
Signature of them to			

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 Doe	
X Remove	<u>v</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	5	HALIMA AKTER	4254 LEO LN APT 118
X Add			RIVIERA BEACH, FL 33410
Remove			2(
2) Change	<u>T</u>	SHAHJAHAN D AFOO	102 HIDDEN HOLLOW DR Palm Beach Gardens, FL 33418
X Add			Palm Beach Gardens, FL 33418
Remove		·	122 F
3) Change			SC 44
Add			- 10 . 25
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artic	(Be specific)			
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	<i></i> }.	22	į
provisions for implementing the amer	idment if not contained in the amendment itself:	SEC	A H	9
(if not applicable, indicate N/A)		ن 🗇 د	===	(
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The date of each amendmen	e(c) adaption: 09/19/2022	, if other than the
ate this document was signed	its) adoption.	
Effective date if applicable:	09/19/2022	
	(no more than 90 days after amendment	t file date)
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing real the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without	out sharebolder action and sharebolder
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast invere sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/we must be separately provid	ere approved by the shareholders through voting groups. The death woting group entitled to vote separately on the death works.	he following statement amendment(s):
"The number of vote	is cast for the amendment(s) was/were sufficient for approv	al
by	(voting group)	"
Dated <u>09/1</u>	9/2022	
:	By a director, president or other officer – if directors or officelected, by an incorporator – if in the hands of a receiver, tappointed fiduciary by that fiduciary)	icers have not been rustec, or other court
	MOHAMMED M HOSSAIN	
	(Typed or printed name of person signing	g)
	PRESIDENT	
	(Title of person signing)	
		~)

2022 SEP 22 AM IO: 26