P210000020890

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: LABIB BALTAGI	INC			
DOCUMENT NUME	BER: P21000020890				
	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	LABIB BALTAGI				
		Name of Contact Perso	n		
	LABIB BALTAGI INC				
		Firm/ Company			
	709 NE 125TH STREET				
		Address			
	MIAMI, FL 33161				
		City/ State and Zip Cod	le e		
	BALTAGI46@GMAIL.COM				
		sed for future annual repor	notification)		
For further informatio	n concerning this matter, pleas	se call: at (786	512-0303		
	of Contact Person	at (ode & Daytime Telephone Number		
•	or the following amount made				
■ \$35 Filing Fee	□\$43.75 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)		
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amen Divisi The C 2415	Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303		

Articles of Amendment to Articles of Incorporation of

FILED

2021 HAY 24 PH 8: 47

LABIB BALTAGI INC		, SECATI	FARY OF Situal	
(Name o	of Corporation as currently f			
P21000020890				
	(Document Number of C	orporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Flo	orida Profit Corporation	adopts the following	amendment(s) to
A. If amending name, enter the new na	ame of the corporation:) & L	i	Tha new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C" chartered, ""professional association," B. Enter new principal office address, (Principal office address MUST BE A S	Corp," "Inc," or "Co". A p or the abbreviation "P.A." if applicable:	npany," or "incorporate rofessional corporation N	d" or the abbreviation	"Corp.,"
C. Enter new mailing address, if application (Mailing address MAY BE A POST)	ica <u>ble:</u> OFFICE BOX)	01/2		
D. If amending the registered agent ar new registered agent and/or the new	nd/or registered office address wregistered office address:	s in Florida, enter the	name of the	
Name of New Registered Agent	AHMADLABIB BALTAGI			
Name of New Registered Agent	709 NE 125TH STREET			
	(Florida street	address)		
V no investorio (Home	MAIMI	,	, Florida 33161	
New Registered Office Address:	(C		(Zip Co	ode)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar wit	h and accept the obligat	. ,	
	Cobis B			
	Signature of New Reg.	istered Agent, if changin	g	

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>	<u>John Doe</u>		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Nam</u>	<u>ue</u>	Address
1) X Change	P	AH	MADLABIB BALTAGI	709 NE 125TH STREET
X Add				MIAMI, FL 33161
Remove				
2) X Change				
Add X				
X Remove 3) Change	P	_ LAI 	BIB BALTAGI	709 NE 125TH STREET
Add				MIAMI, FL 33161
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

<u>If amending or adding additional Ar</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)
****	WA
	1
	.
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
	N 18+
· <u> </u>	

	05/20/2021	
The date of each amendment(s)	adoption:	, if other than
date this document was signed.		
	/20/2021	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fik	· date)
	(na more man 27 days igur amenameni jiu	
Note : If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requir Department of State's records.	ements, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for t sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The for or each voting group entitled to vote separately on the ame	ollowing statement ndment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
	of the differential and the second a	
ьу <u>100</u>	·	
	(voting group)	
05/20/20	21	
Dated		
Signature	Chib BAILISA	
(By a selec	director, president or other officer – if directors or officers ted, by an incorporator – if in the hands of a receiver, truste inted fiduciary by that fiduciary)	have not been be, or other court
	AHMADLABIB BALTAGI	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the

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