

P21000047129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

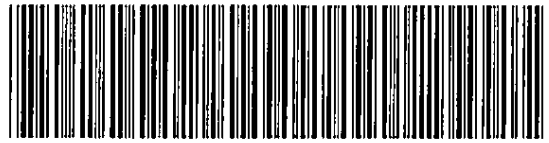
(Document Number)

Certified Copies _____ Certificates of Status _____

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Title, Signature

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STATE
TREASURER
FL

AP

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ABDALLA SERVICES INC

DOCUMENT NUMBER: P21000047129

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABALLATIF DARWISHAHMED

Name of Contact Person

Firm/ Company

10135 W SUNRISE BLVD 101

Address

PLANTATION FL 33322

City/ State and Zip Code

SDARWISHAHMED@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABDALLATIF DARWISHAHMED

at (954)

210-2222

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 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

Street Address

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

FILED

ABDALLA SERVICES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P21000047129

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

LendEase INC

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent ABDALLATIF DARWISHAHMED

10135 W SUNRISE BLVD 101

(Florida street address)

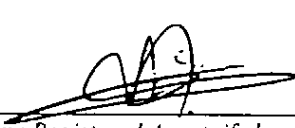
New Registered Office Address: PLANTATION, Florida 33322

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature 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.

[illegible][illegible]

The date of each amendment(s) adoption: _____, if other than the 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____,"
(voting group)

Dated 02/06/2024

Signature _____

(By a director, president or other officer— if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Abdullahatif Darwish Ahmed
(Typed or printed name of person signing)

VP

(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 5, 2024

ABALLATIF DARWISHAHMED
10135 W SUNRISE BLVD 101
PLANTATION, FL 33322

SUBJECT: ABDALLA SERVICES INC
Ref. Number: P21000047129

We have received your document for ABDALLA SERVICES INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 624A00002493

Dear Agent

I hope this letter finds you well. I am writing to request an amendment to my company's records with the Division of Corporations. Two years ago, I registered my company, [ABDALLA SERVICES INC], and recently discovered that there is a minor spelling error in MY name ABDALLATIF DARWISHAHMED. Additionally, I wish to change the name of the company to better reflect its current business activities.

Details of the Changes:

Current Company Name: [ABDALLA SERVICES INC]

Proposed Corrected Company Name: [LendEase INC]

Current Personal Name:[ADALLATIF DARWISHAHMED]

Proposed Corrected Company Name: [ABDALLATIF DARWISHAHMED]

I have enclosed the required filing fee and completed the necessary forms for the requested changes. Please find attached the following documents:

Articles of Amendment to change the company name.

Articles of Amendment to correct the spelling error.

Enclosed, please find a check in the amount of [Filing Fee Amount] payable to the Florida Department of State.

I kindly request your prompt attention to this matter, and I appreciate your assistance in ensuring that the Division of Corporations reflects accurate information for my company. If there are any additional forms or information required, please let me know as soon as possible.

Thank you for your attention to this matter, and I look forward to receiving confirmation of the successful processing of these amendments.

Sincerely,

ABDALLATIF DARWISHAHMED