P21000059227

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	DRATION: MASARI INC.		
	1BER: P21000059227		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cori	respondence concerning this ma	tter to the following:	
	NAIEM H. SKARGEE		
		Name of Contact Persor	1
	MASARI INC.		
		Firm/ Company	
	507 HERBERT ST. STE A	, -	
		Address	
	PORT ORANGE,FL 32129		
		City/ State and Zip Code	2
	ACCT7264@GMAIL.COM		
	-	ed for future annual report	notification)
For further informat	ion concerning this matter, pleas	•	SA6 A675
	e of Contact Person	at (386) 846-4675 de & Daytime Telephone Number
Nam	e of Contact Person	Area Co	ae & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)
Ai Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 dlahassee, FL 32314	Amend Divisio The Co	Address ment Section in of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

MASARI INC.	2021 AUG -2 PM 12 LB
(Name of Corporation as curr	rently filed with the Florida Dept. of State)
P21000059227	SOURETARY OF STATE INCLAMASSED FLOORS
(Document Numb	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>n:</u>
	The new
name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp," "Inc," or "Co "chartered," "professional association," or the abbreviation "I	". A professional corporation name must contain the word
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 new registered agent and/or the new registered office ado	
Name of New Registered Agent	
(Florid	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A l hereby accept the appointment as registered agent. I am fami	
Signature of N	lew 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.

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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	ESSAM H. MGAHED	3761 MAYO CIRCLE
Add			ORMOND BEACH, FL 32174
X Remove			
2) Change	T,S	монаммар м. кнавахен	290A N. HWY US1
Add			ORMOND BEACH, FL 32174
X Remove Change	_		
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	. (Be specific)			
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If an amendment provides for an exc	change, reclassifi	cation, or cancella	ition of issued sh	ares.
provisions for implementing the am	endment if not c	ontained in the ar	nendment itself:	
(if not applicable, indicate N/A)				
			<u> </u>	
-				

The date of each amendment(s) adoption:, if other that
date this document was signed.
67/27/2021 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 adocument'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)
07/27/2021
Dated
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)
NAIEM II. SKARGEE
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

the

the