Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210003607093)))



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| | Division of C | orporations |
| | . Fax Number | : (850)617-6380 |
| From: | • | |
| | Account Name | : EXPERTAX |
| | Account Numbe | r : I20200000010 |
| | Phone | : (407)777-7470 |
| | Fax Number | : (321)206-9743 |
| **Enter | the email addre | ss for this business entity to be used for future lings. Enter only one email address please.** |

COR AMND/RESTATE/CORRECT OR O/D RESIGN NOBLE SUPPLIERS CORP

| Certificate of Status | 1 |
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SEP 2 8 2021

S. PRATHER

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: NOBLE SUPPLIERS CORP DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DRISS BENKHALOUF Name of Contact Person NOBLE SUPPLIERS CORP Firm/ Company 2600 MICHIGAN AVE STE 453516 Address KISSIMME FL 34745 City/ State and Zip Code ORLANDO4U2@HOTMAIL.COM E-mail address: (to be used for future annual report polification) For further information concerning this matter, please call: at (787) 657-365-Area Code & Daytime Telephone Number DRISS BENKHALOUF Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee S43.75 Filing Fee & **☐\$43.75** Filing Fee & \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
Tallahassee, FL 32303

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 | SEGRETA TALLAHAS | 2021 SEP 2 |
|---|--|------------|
| NOBLE SUPPLIERS CORP | SEX SEX | LE 27 |
| (Name of Corporation as currently filed with the Flo | rida Dept. of State) | ≩ □ |
| P21000060374 | . Haran | <u>.</u> |
| (Document Number of Corporation (if kno | RID RID | မ္ |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation: | oration adopts the following amendme | nt(s) to |
| A. If amending name, enter the new name of the corporation: | | |
| | The new | |
| name must be distinguishable and contain the word "corporation," "company," or "incompany," or "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corp "chartered," "professional association," or the abbreviation "P.A." | rporated" or the abbreviation "Corp.," | |
| 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, ent- new registered agent and/or the new registered office address: | er the name of the | |
| Name of New Registered Agent | | |
| · | | |
| (Florida street address) | | |
| New Registered Office Address: | , Florida | |
| (Cig) | (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 a | 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>y</u> | Mike Jones | |
| <u>X</u> Add | \underline{sv} | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | VP | BOUROUAIL ABDELHADI | 1519 HEATHER WAY |
| X Add | | | KISSIMME FL 34744 |
| Remove | | | |
| 2)Change | | | |
| Add | | • | |
| Remove 3) Change | | · · · · · · · · · · · · · · · · · · · | |
| Add | | | |
| Кеточе | | | |
| 4) Change | | | _ |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | · | |
| Remove | | | |

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| ation, or cancellation of ntained in the amending | issued shares, nt itself: | |
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| | eation, or cancellation of | |

| | 09/27/2021 | , if other than the |
|--|--|--|
| The date of each amendment date this document was signed | | |
| | 09/27/2021 | |
| Effective date if applicable: | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in document's effective date on t | this block does not meet the applicable statutory filing requirements, this date with the Department of State's records. | ll 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 shareholder action an | d shareholder |
| ☐ The amendment(s) was/we by the shareholders was/w | re adopted by the shareholders. The number of votes cast for the amendment(s) rere sufficient for approval. | |
| must be separately provide "The number of vote by | (voting group) (voting group) | 2021 SEP 27 AM 9: 38 SEURETARY OF STATE TALLAHASSEE, FLORIDA |
| | PRESIDENT | |
| | (Title of person signing) | |

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