P21000068250

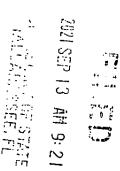
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A. Butler

COVER LETTER . . .

TO: Amendment Secti Division of Corpo			
NAME OF CORPOR	ATION: Sama Collaborativ	e, Inc.	
DOCUMENT NUMB	ER: 2100068250		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
-	Dina H. Arouri		
		Name of Contact Perso	n
	Arouri Legal Advocacy and (Consulting, P.A.	
-	,	Firm/ Company	
	1507 S. Hiawassee Road. Sui	ite 212	
-		Address	
(Orlando, FL		
_		City/ State and Zip Cod	c
	dina@arourilegal.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
Dina Arouri		at (312-6653
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)
Amer Divis P.O. 1	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to **Articles of Incorporation** of

Sama Collaborative, Inc.		Trans ormer Reserve
(Name of Corporation	as currently filed with the Florida	Dept bestate 3 Alf 9:21
1000068250		7 - 707 2 - 27
(Document	t Number of Corporation (if known)	FALLANA VEES, FI
Pursuant to the provisions of section 607.1006, Florida St is Articles of Incorporation:	atutes, this Florida Profit Corporat	·
. If amending name, enter the new name of the corp.	oration:	
		The new
name must be distinguishable and contain the word "corportion." or Co.," or the designation "Corp," "Inc," of chartered," "professional association." or the abbrevia	r "Co". A professional corporati	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u>	<u></u>	
		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
 If amending the registered agent and/or registered new registered agent and/or the new registered offi 		e name of the
Name of New Registered Agent		
•		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changing Registe hereby accept the appointment as registered agent. I am		ations of the position.
	-	

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 Doc	
_	_		
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Samia Sohl	1507 Hiawassee Rd Suite 212
Add			Orlando, FL 32835
X Remove			
2) Change	VP	Samia Solh	1507 S. Hiawassee Rd Suite 212
XAdd			Orlando, FL 32835
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u></u>	

•

The date of each amendment(s) adoption:	, if other than th
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, the document's effective date on the Department of State's records.	nis date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholde action was not required.	r action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendr by the shareholders was/were sufficient for approval.	nent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following st 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	
(10000000000000000000000000000000000000	
September 8, 2021 Dated	
Signature / to	
(By a director, president or other officer - if directors or officers have not be	
selected, by an incorporator – if in the hands of a receiver, trustee, or other	court
appointed fiduciary by that fiduciary)	
Hasan S. Arouri	
(Typed or printed name of person signing)	
President	

(Title of person signing)

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