## P21000085446

(Requestor's Name)			
(Addres	s)		
(Address)			
(City/Sta	ate/Zip/Phone #	)	
	_		
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Docum	ent Number)		
Certified Copies	Certificates of	Status	
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Special Instructions to Filing Officer:			
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Office Use Only



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); ,—|\display.

## **COVER LETTER**

NAME OF CORPORATION: REAL THREE BROTHERS INC P210000 85446 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANOUAR FOUINE REAL THREE Brothers / MANHATTAN Smote Shop 1239 S US Hwy 17-92
Address Longwood Florida 32750
City/ State and Zip Code ZOUINE 72 a) Hotamail . Com

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ANOUAR ZOUINE at (703), 347 3954
Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

**Mailing Address** 

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, 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

Articles of Inc	=	
REAL THREE Brother		
(Name of Corporation as current)	ソープラン 177 レート Florida Dept. of	f State)
P 2 1 0 0 0 0 5		i State)
	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopt	ts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		_
name must be distinguishable and contain the word "corporation," "o" lnc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	1 professional corporation name	The new the abbreviation "Corp" e must contain the word
B. Enter new principal office address, if applicable;		72
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
		** 3 F
		I
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		TO PA
		2:
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		of the
	<u> </u>	
Name of New Registered Agent		
(Florida Mr.	rat addinger	
New Registered Office Address:	, Flo (City)	orida (Zip Code)
_	,	(ing sons)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	: with and accept the obligations of	the position.
Signatura of V D	onistand Again W.L.	<del></del>
	egistered Agent, if changing	
Check if applicable		

<sup>☐</sup> 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 = ChiefExecutive 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</u>	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	YP	EL BOUA KHRI ELHOUCINE	1239 Sus Hwy 17-92
Add			Longwood Florida 32750
Remove			
2) Change			五五
Add			SSE 31 F
Remove 3) Change			TICH AND PH 2:
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	amandment file date)
(no more than 90 days after	umenameni jile aalej
Note: If the date inserted in this block does not meet the applicable statuto document's effective date on the Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
★ The amendment(s) was/were adopted by the incorporators, or board of direction was not required.  ■ The amendment(s) was/were adopted by the incorporators, or board of direction was not required.  ■ The amendment(s) was/were adopted by the incorporators.  ■ The amendme	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	groups. The following statement (s): 88 H 3 P 2:
"The number of votes cast for the amendment(s) was/were sufficient	for approval
by(voting group)	
(voting group)	
Dated 05   20   2022	
Signature	
(By a director, president or other officer – if directed, by an incorporator – if in the hands of a	
appointed fiduciary by that fiduciary)	
ANIMAD JOHN	., **
(Typed or printed name of per	son signing)
Procedent	
(Title of person signing)	