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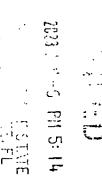
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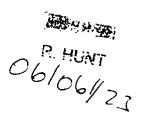
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FAIR FACTORING	G AND FINANCING I	INC						
DOCUMENT NUMB									
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.							
Please return all corresp	oondence concerning this ma	tter to the following:							
ſ	RENGINAR ISUFOVA								
_		Name of Contact Pe	erson			-			
ŀ	FAIR FACTORING AND FI	NANCING INC							
-		Firm/ Company	•			-			
	276 SHERYL DR.					7:2			
-		Address				ىب ـ 			
ī	DELTONA, FL 32738					!			
-		City/ State and Zip (Code		· , · :	က်			
Ruminna2000@yahoo.com									
-	E-mail address: (to be us	sed for future annual rep	port notifica	ation)	三三	=			
For further information	concerning this matter, pleas	se call:							
Rumiana McCormick		at (<u>84</u> 7) 962	-9663					
Name of	Contact Person	Area	Code & D	aytime Telephon	e Numbe	r			
Enclosed is a check for	the following amount made	payable to the Florida I	Department	of State:					
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Ce Ce (A	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy enclosed)	:				
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	An Div Th 24		ection orporations of Tallahassee nroe Street, Suit	e 810				

Articles of Amendment to Articles of Incorporation of

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currently filed with the Florida Dept. of State)
Number of Corporation (if known)
utes, this Florida Profit Corporation adopts the following amendment(s
ration: The new
ation," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word on "P.A."
N/A
<u>\(\frac{1}{2} \) \\ \frac{1}{2} \\</u>
The state of the s
N/A
ffice address in Florida, enter the name of the eaddress:
. audi(133.
Florida street address)
, Florida
(City) (Zip Code)
ed Agent: familiar with and accept the obligations of the position.
of New Registered Agent, if changing
Nu ute att att att att att att att att att a

☐ 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			#50 0.0 0.0
2) Change			
Add			: · · · · · · · · · · · · · · · · · · ·
Remove 3) Change			11.0 V
Add			
Remove			
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Add			
Remove			
5) Change			
Add			
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6) Change			
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(Attach additional sheets, if necessary). (E					
N/A					
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F. If an amendment provides for an exchang	<u>e, reclassificat</u>	ion, or cancella	tion of issued sha	res,	
provisions for implementing the amenda	nent if not cont	ained in the an	<u>iendment itself:</u>		
(if not applicable, indicate N/A)					
N/A			_	_	
		<u>. </u>			-
		·			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
05/22/2023	
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 require document's effective date on the Department of State's records.	ements, 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 directors without shaction was not required.	nareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The fol must be separately provided for each voting group entitled to vote separately on the amen	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
	بن المحدد ا
05/22/23	til Le
Dated	<u> </u>
	(A)
Signature Peni Isufova	
(By a director, president or other officer – if directors or officers is selected, by an incorporator – if in the hands of a receiver, trustee appointed fiduciary by that fiduciary)	
RENGINAR ISUFOVA	
(Typed or printed name of person signing)	
President	

(Title of person signing)