

## Flonidal Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : GRACE FINANCIAL CONSULTING, INC.

Account Number : I19990000092

Phone : (561)844-9806 Fax Number : (561)689-1131

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN CRK 959 ENTERPRISE INC

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Corporate Filing Menu

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: CRK 959 ENTERPRISE INC DOCUMENT NUMBER: P22000093847 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MD A CHOWDHARY Name of Contact Person CRK 959 ENTERPRISE INC Firm/ Company 1028 BIG TORCH ST Address RIVIEARA BEACH, FL 33407 City/ State and Zip Code SUMON.RUSA24@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561 ) 201-0092

Area Code & Daytime Telephone Number MD A CHOWDHARY Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ☐ \$52.50 Filing Fee ☐\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status 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

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 σf

CRK 959 ENTERPRISE INC					
(Name of Corporation as current)	y filed with the Florida Dept. of State)				
P22000093847					
(Document Number of	Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	llowing amen	idment(s) t		
A. If amending name, enter the new name of the corporation:					
		The	new		
name must be distinguishable and contain the word "corporation," "Contain the word "corporation," "Contain the word "corporation," "Contain the word "corporation," or "Contain the word "contain the word "corporation," or "Contain the word "contai	A professional corporation name must	reviation "Cor contain the v	rp.," word		
B. Enter new principal office address, if applicable:	3191 S MILITARY TRL				
(Principal office address MUST BE A STREET ADDRESS)	LAKE WORTH, FL 33463				
			_		
			_		
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)		202L			
		<del>:                                    </del>	· · · · · · · · · · · · · · · · · · ·		
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the		स्यास्त्र }		
new registered agent and/or the new registered office address	<u> </u>	Ã	ويسدي		
Name of New Registered Agent		·	<b>V.</b>		
		06			
(Florida st	reet address)				
New Registered Office Address:	, Florida				
New Regulation Of Square Conf.	(City)	(Zip Code)			
Name To the state of the State of the State of Agent	<b>6</b> .				
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	or with and accept the obligations of the po	sition.			
Signature of New )	Registered Agent, if changing	<del></del>			
•					

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>	<u>John Doe</u>	
X Remove	<u>y</u>	Mike Jones	
<u>X</u> Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1)Change	<u>s</u>	MD K ISLAM	4184 SHERRI CT
X Add			LAKE WORTH, FL 33461
Remove			
2) Change			
Add			
Remove 3) Change	<del></del>		200
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

	(Be specific)					
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provisions for implementing the ame	ange, reclassificat ndment if not cont	ion, or cancella ained in the ar	itjon of issued sl nendment itself:	nares.		
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassificat ndment if not cont	ion, or cancella	itjon of issued sl nendment itself:	lares.		
provisions for implementing the ame	ange, reclassificat ndment if not cont	ion, or cancells ained in the as	ition of issued s nendment itself:	nares.		
provisions for implementing the ame	ange, reclassificat ndment if not cont	ion, or cancella	itjon of issued şi nendment itself:	nares.	<b>1</b> 4	
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	ange, reclassificat ndment if not cont	ion, or cancells ained in the ar	ution of issued 5 nendment itself:	nares,		
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The date of each amendment(s) adoption: 07/16/2024	, if other than the
date this document was signed.	
Effective date if applicable: 07/16/2024	
(no more than 90 days after amendment file date)	<del></del> .
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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):	202
"The number of votes cast for the amendment(s) was/were sufficient for approval	E   L   2024 JUL 17
by (voting group)	7 7
Dated 07:16:2024	M 9: 06
Signature handhary  (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)	
MD A CHOWDHARY	<del></del>
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	