

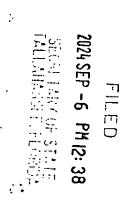
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03 J. Dr. W. W. 1-634 (** 655.)



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ZAID FOOD MAI	RT, INC.	<u> </u>	
DOCUMENT NUM	P23000026107			
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	itter to the following:		
	TIM A HAMED CPA			
	******	Name of Contact Perso	on	
	TIM A HAMED, CPA, PA			
		Firm/ Company		
	15310 AMBERLY DR., STE	£ 250		
		Address		
	TAMPA, FL 33647			
		City/ State and Zip Coc	de	
	E-mail address: (to be us	sed for future annual repor	t notification)	
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For turiner information	on concerning this matter, pleas	se can:		
TIM A HAMED		at (514-2905	
Name	Name of Contact Person Area Code & Daytime Telephon			
inclosed is a check for	or the following amount made	payable to the Florida Dep	partment of State:	
S35 Filling Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section			Address	
	endment Section ision of Corporations	Amendment Section Division of Corporations		
). Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

Articles of Amendment to Articles of Incorporation of

vith the Florida Dept. of State)
ation (if known)
Profit Corporation adopts the following amendment(s) t
The new
," or "incorporated" or the abbreviation "Corp.," sional corporation name must contain the word
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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	PT	John Doe			
X Remove	\underline{V}	Mike Jones			
<u>X</u> Add	<u>SV</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VP	ZAID SULAIMAN	2508 E. 131ST AVE.		
Add			TAMPA, FL 33612		
X Remove					
2) Change	VP	ZAID W. SHAHIN	8007 WATER TOWER DR		
XAdd			TAMPA, FL 33619		
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6)Change	 				
Add			-		
Remove					

(Attach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:	If amending or adding (Attach additional sheet)	<u>g additional Articles</u> etc. if necessaryl — A	s, enter change Be specific)	e(s) nere:			
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	09/01/2024	
The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirement artment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators, or board of directors without shareho	older action and shareholder
■ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amicient for approval.	endment(s)
	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	
"The number of votes east fo	r the amendment(s) was/were sufficient for approval	
bv		
•	(voting group)	
SEP 01, 2024 Dated		
(By a dire selected,	etor, president or other officer – if directors or officers have a by an incorporator – if in the hands of a receiver, trustee, or of fiduciary by that fiduciary)	
N	IOHAMAD A. HASSAN ALI	
_	(Typed or printed name of person signing)	
P	RESIDENT	
-	(Title of person signing)	