P24000020483

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200431145012

06/43/24--01001--023 **43.75

M

COVER LETTER

TO: Amendment Section Division of Corporations

SPITALITY SERVICES INC.
e are submitted for filing.
this matter to the following:
Name of Contact Person
Y SERVICES INC.
Firm/ Company
BET .
Address
741
City/ State and Zip Code
l.com
to be used for future annual report notification)
er, please call: at (407) 557-5077 Area Code & Daytime Telephone Number
Area Code & Daytime Telephone Number
at made payable to the Florida Department of State:
Fee & S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)
Street Address Amendment Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
i i (i

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

NASR HOSPITALITY SERVICES INC.	
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P24000020483	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	3411 CANVAS STREET
(Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE, FL 34741
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	3411 CANVAS STREET
	KISSIMMEE, FL 34741
D. If amending the registered agent and/or registered office add	Iress in Florida, enter the name of the
new registered agent and/or the new registered office addres	<u>s:</u>
Name of New Registered Agent	
(Florida st	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.
7 / / / / / / / / / / / / / / / / / / /	,
Pri	\Diamond
Signature of New I	Registered Agent, if changing
☐ 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 Doc 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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	T	HEBA HUSSEIN	3411 CANVAS STREET
X Add		-	KISSIMMEE, FL 34741
Remove			
2) Change			
Add			•
Remove Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Re specific)
	
* • •	
	-
	1 d 1
 	
<u>If an amendment provides for an excl</u>	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

 $F_{ij} = F_{ij} = F$

MAY 23, 2024	•••
The date of each amendment(s) adoption:	, if other than the
ū	
Effective date <u>if applicable</u> : (no more than 90 days after amendmen	ut filo data)
(no more than 90 days after amenamen	a jue dalej
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. T must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approv	al
NASR, SAYED	
by	<i>→</i>
MAY 24, 2024 Dated	
X Signature Sayed Nast	
(ffy a director, president or other officer – if directors or off selected, by an incorporator – if in the hands of a receiver, t appointed fiduciary by that fiduciary)	
NASR, SAYED	
(Typed or printed name of person signing	
PRESIDENT	
(Title of person signing)	