P24000020828

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SECRETARY OF STATE ALLAHASSEE, FLORID

RECEIVED

COVER LETTER

O: Amendment Section Division of Corporations				
SAME OF CORPORATION: ACCIMI 101 10 C				
DOCUMENT NUMBER: 22400020828				
the enclosed Articles of Amendment and fee are submitted for filing.				
lease return all correspondence concerning this matter to the following:				
Shahzad Rahman Name of Contact Person				
Adam 101 In C Firm/ Company				
1512 Halrison Ave				
Address				
Panama City, FL, 32405				
City/ State and Zip Code				
Shinhzadlahman 23 Q gwail- Com E-mail address: (to be used for future annual report notification)				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Shuhzud Ruhm'an at (850) 276-9937 Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is enclosed)				
Mailing Address Amendment Section Amendment Section				
Division of Corporations Division of Corporations				
P.O. Box 6327 The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation

. . .

Λ		
Adam 10/1nc		
(Name of Corporation as currently	filed with the Florida Dept. of State)	_
P24000020828		
(Document Number of	Corporation (if known)	—
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	orida 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," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
· · · · · · · · · · · · · · · · · · ·		
C. Patanana at T. H. 15 P. H.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address	ss in Florida, enter the name of the	
new registered agent and/or the new registered office address:		
Name of New Registered Agent		
(Florida stree	(address)	
	č.	
New Registered Office Address: (C	ity) (Zip Code)	
,-	(Sip Court)	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.	
Signature of New Reg	istered Agent, if changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c)	, 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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	se Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change	<u>VP</u> _	Junaid Astam	SIZ Harrison AVE Panama City, Fl. 32405
Add			Panama City, FC. 32405
X Remove			
2) Change			
Add			
Remove 3 1 Change			
Add			
Remove			· ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
_ Remove			

amending or adding additional Articles, en stach additional sheets, if necessary). (Be sp	recific)			
		_		<u>_</u>
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	<u> </u>	 -		
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an amendment provides for an exchange, r rovisions for implementing the amendment	eclassification, o	r cancellation of	issued shares,	
(if not applicable, indicate N/A)	11 MOL COMMUNICO	in the amendine	at itsen.	
			-	 ·
	-			
·				

The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		-
Effective date if applicable:		
	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
Note: If the date inserted in this block document's effective date on the Depart	c does not meet the applicable statutory filing requirements, this tment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder a	action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the amendme ient for approval.	ent(s)
☐ The amendment(s) was/were approvemust be separately provided for each	ed by the shareholders through voting groups. The following stat h voting group entitled to vote separately on the amendment(s):	ement
"The number of votes east for	the amendment(s) was/were sufficient for approval	
bv	••	
•	(voting group)	
Dated0 4/	10812024	
Signature	10812024 m/m/m	
(By a direct selected, by	or, president or other officer – if directors or officers have not be an incorporator – if in the hands of a receiver, trustee, or other conductary by that fiduciary)	
	Shahzad Rahman (Typed or printed name of person signing)	
	\	
<u>'/</u>	resident	
	(Title of person signing)	