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SECRETARY OF SIAN



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: _

NAME OF CORPORATION: 1510 him 101 /n C

DOCUMENT NUMBER: 24000022890

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shahzad Rahman

Name of Contact Person

1580 him 101 /n C

Firm/ Company

7409 & Huy 22

Address

Panama City FC, 32404

City/ State and Zip Code

Shahzadrah Managagaraif. Com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shish Zad Sahmand at (856) 276.9937

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:

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

. : 3

Articles of Amendment

Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) (Name of Corporation as currently filed with the Florida Dept. of State) (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp." "Inc." or "Co." A professional corporation name must contain the word "charged" professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST RE A STREET ADDRESS) C. Enter new mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Plorida street address) New Registered Office Address: (City) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	1680 hin/ 10/ 100	
(Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code)	(Name of Corporation as currently filed with the Florid	a Dept. of State)
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(Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent:	new registered agent and/or the new registered office address:	,
New Registered Office Address:, Florida	Name of New Registered Agent	
New Registered Office Address:, Florida		:
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	(Florida street address)	
New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:	, Florida
	(City)	(Zip Code)
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.		
	I hereby accept the appointment as registered agent. I am familiar with and accept the oblig	gations of the position.
Signature of New Registered Agent, if changing	Signature of New Presistened Agent if show	
		8118
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
I) Change	VP	- Fallba Byhald	4702 Hwy 389 Lynn Haven, Fc, 3244
Add			Lynn Haven, FC, 3244
Remove			
2) Change			
Add			
Remove Change			
Add			:
Remove			· .
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s (Be specific)				
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an amendment provides for an exc	jange, reclassificatio	n, or cancellation	of issued shares,		
provisions for implementing the ame	ndment if not contai	ned in the amendr	nent itself:		
(if not applicable, indicate N/A)					
				<u> </u>	_
	-			-	
				=	
		· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) ac	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sh	areholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes east for th	e amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	lowing statement dment(s):
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated	1/08/24 umlnh	
Signature	hmenl	
(By a dir selected	ector, president or other officer – if directors or officers h, by an incorporator – if in the hands of a receiver, trustee ed fiduciary by that fiduciary)	
-	Shahzad Sahmau (Typed or printed name of person signing)	<u> </u>
	_	1
-	President	
	(Title of person signing)	