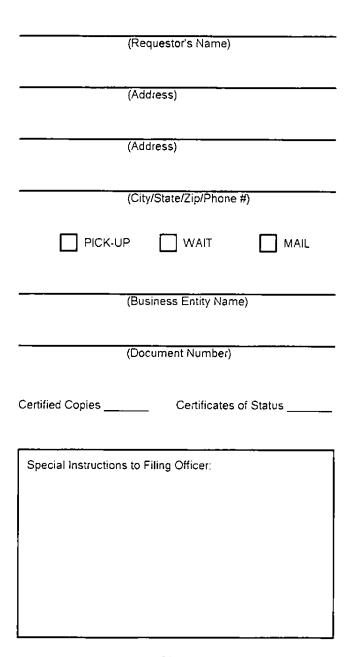
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Office Use Only



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COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORAT | TION: MI FORTUNA M | IARKET CORP | | | |
|--|---|--|--|--|--|
| DOCUMENT NUMBER | R: | | | | |
| The enclosed Articles of A | Amendment and fee are sub | omitted for filing. | | | |
| Please return all correspon | ndence concerning this mat | ter to the following: | | | |
| | YOUSEF WAKIL | | | | |
| | Name of Contact Person | | | | |
| | Firm/ Company | | | | |
| _ | Address | | | | |
| | | 3960 N 56TH AVE APT | · · · · · · · · · · · · · · · · · · · | | |
| | | City/ State and Zip Cod | ie | | |
| | | HOLLYWOOD, FL 33 | | | |
| _ | E-mail address: (to be us | ed for future annual report | notification) | | |
| For further information c | oncerning this matter, pleas | se call: | | | |
| YOUSEF WAKIL | | 786 | 683-4985 | | |
| Name of Contact Person | | | ode & Daytime Telephone Number | | |
| Enclosed is a check for th | ne following amount made | payable to the Florida Dep | partment of State: | | |
| \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 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 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 | | | |

Articles of Amendment to Articles of Incorporation of

P24000025530

| (Name of Corporation as curre | ntly filed with the Florida Dept. of State) |
|--|--|
| (Document Number | r of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation: | nis Florida Profit Corporation adopts the following amendment(s) |
| 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 professional corporation name must contain the word |
| | |
| B. Enter new principal office address, if applicable: | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | • |
| | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
| | C; |
| | (די־ |
| C. Enter new mailing address, if applicable: | |
| (Mailing address MAY BE A POST OFFICE BOX) | 2: |
| | .ກ ယ |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr | |
| Name of New Registered Agent | |
| | |
| (Florida | street address) |
| V B . 100 | P1 |
| New Registered Office Address: | (City) , Florida (Zip Code) |
| New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili | ent: |
| Signature of New | w Registered Agent, if changing |
| Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (| II) (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 | <u>P1</u> | John Ooe | |
|-------------------------------|--------------|--------------|-------------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | P | LYNDA NASSER | 3960 N 56TH AVE APT 403 |
| Add | , | | HOLLYWOOD FL 33021 |
| Remove | 'n | DAMAA NASSER | 3960 N 56TH AVE APT 403 |
| 2) Change | P | DAWAA NASSER | |
| X Add | | | HOLLYWOOD FL 33021 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |

. . .

| | option: | , if other than th |
|---|--|--|
| 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 bl document's effective date on the Dep | ock does not meet the applicable statutory filing require partment of State's records. | ements, this date will not be listed as th |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were ado action was not required. | oted by the incorporators, or board of directors without sh | nareholder action and shareholder |
| ☐ The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the ficient for approval. | ne amendment(s) |
| ☐ The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The foreach voting group entitled to vote separately on the amen | llowing statement ndment(s): |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | | |
| <u> </u> | (voting group) | |
| Dated | 04/24/2024 | |
| Signature | | · |
| (By/a di selected | cord, tresident or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trusteed fiduciary by that fiduciary) | |
| | YOUSEF WAKIL | • |
| · | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |