12/15/24, 8:05 PM



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(((H24000412026 3)))



H240004120263ABCV

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Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN® PRO DESK INC.

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Help



December 16, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PRO DESK INC. 8512 KATELLA AVE. ANAHEIM, CA 92804US

SUBJECT: PRO DESK INC. REF: P24000034274

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please provide a date of adoption within the corresponding section of the articles.

If you have any further questions concerning your document, please call (850) 245-6050.

Jalesa S Dennis FAX Aud. #: H24000412026 Regulatory Specialist II Supervisor Letter Number: 224A00027303 Amendment Section * Page, 4 of 8

COVER LETTER

| TO: Amendment Sect Division of Corp | | | | | | |
|--|---|--|---|-------------|--|--|
| NAME OF CORPOR | RATION: PRO DESK INC. | | | - | | |
| DOCUMENT NUM | BER: P24000034274 | | | _ | | |
| The enclosed Articles | of Amendment and fee are sul | omitted for filing. | | | | |
| Please return all corre | spondence concerning this mat | ter to the following: | | | | |
| | Mike Town | | | | | |
| | | Name of Contact Person | | | | |
| | LegalZoom.com, Inc. | | | | | |
| | | Firm/ Company | | | | |
| 9900 Spectrum Dr | | | | | | |
| | Address | | | | | |
| | Austin, TX 78717 | | | | | |
| | | City/ State and Zip Code | : | | | |
| | upon_rqst@yahoo.com | | | | | |
| | E-mail address: (to be us | ed for future annual report | notification) | _ | | |
| For further informatio | n concerning this matter, pleas | e call: | | | | |
| Mike Town | | at (| | | | |
| Name | of Contact Person | Area Coo | le & Daytime Telephone N | | | |
| Enclosed is a check for | or the following amount made p | payable to the Florida Depa | artment of State: | 9 | | |
| □ \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy | O MALLINE | | |

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

is enclosed)

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

To:

Articles of Amendment to Articles of Incorporation of

| PRO DESK INC. | | | | |
|--|------------------------------|--|-------------------|--|
| (Name | of Corporation as current | y filed with the Florida Dept. of State) | | |
| P24000034274 | | | | |
| | (Document Number o | f Corporation (if known) | | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | 1006, Florida Statutes, this | Florida Profit Corporation adopts the following amendm | ient(s) to | |
| A. If amending name, enter the new n | ame of the corporation: | | | |
| | | The nev | 161 | |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association," | Corp." "Inc." or "Co" | company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the wor | •• | |
| D. Enter new principal office address | if applicable: | 8512 Katella Ave | | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | Anaheim, CA 92804 | | |
| | | | | |
| | | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | | | |
| (stating thatess SINT BEAT OF | OFFICE BOX | | | |
| | | | | |
| | | | | |
| D. If amending the registered agent ar new registered agent and/or the new | | | | |
| Linited States Corporation Agents Inc | | _ | | |
| Name of New Registered Agent | 476 Riverside Ave. | | | |
| | | eet address) | | |
| | Jacksonville | 32202 | | |
| New Registered Office Address: | | (City) Florida (Zip CodP) | | |
| | | TO LAN | सम्बद्धमा उद्ग | |
| New Registered Agent's Signature, if c | | ivith and accept the obligations of the position. | t " | |
| The solution of the same of th | , | en in the second of the second | | |
| In the term | Erik Treutlein | ASSISTANT SECRETARY, UNITED STATES 2 2 | | |
| <u>/5/ Enl</u> | k Treutlein CORPORATE | ON AGENTS, INC. egistered Agent, if changing | | |
| | Signature of New K | egisterea Agent, ij changing | | |

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:

Remove

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>PT</u> <u>John</u> | <u>Doe</u> | |
|-------------------------------|-----------------------|-------------------------|-------------------|
| \underline{X} Remove | <u>V</u> <u>Mike</u> | Jones | |
| X Add | SV Sally | Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) X Change | PSTD | NONAHAL, MICHAEL | 8512 KATELLA AVE. |
| Add | | | ANAHEIM, CA 92804 |
| Remove | D | SHAHMOHAMMADI, KIANOR | 8512 KATELLA AVE. |
| 2) X Change | <u>D</u> | SHAPINUHAMMADI, KIANOK | |
| Add | | | ANAHEIM, CA 92804 |
| Remove 3) X Change | <u>D</u> | KHOSRAVI, MOHAMMAD REZA | 8512 KATELLA AVE. |
| Add | | | ANAHEIM, CA 92804 |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | S 2025 JAN 77 |
| 5) Change | | | |
| Add | | | (A) |
| Remove | | | 95 ST. 7 |
| 6) Change | | | |
| Add | | | m o |
| | | | |

| Attach additional sheets, if necessary). | icles, enter change(5) here: (Be specific) | | |
|--|--|-----------------|-------------|
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| f an amendment provides for an excl | nange, reclassification, or cancellation of issued | shares, | |
| provisions for implementing the amo (if not applicable, indicate N/A) | endment if not contained in the amendment itse | <u>:::</u> | |
| | | | |
| | | | |
| | | | |
| | |) | 20/25 |
| | | ; - | <u></u> |
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| | | | - |

| The date of each amendment(s) add | option: | 12/15/2024 | , if other than the |
|--|--|--|---|
| date this document was signed. | | | |
| Effective date if applicable: | | than 90 days after amendment file do | ntal. |
| | (no more | than 90 days after amenament file at | ac) |
| Note: If the date inserted in this blo document's effective date on the Dep | | | ents, this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ON | E) | |
| The amendment(s) was/were adoptaction was not required. | ited by the incorporat | ors, or board of directors without shar | eholder action and shareholder |
| ☐ The amendment(s) was/were adop by the shareholders was/were suff | | ers. The number of votes cast for the | amendment(s) |
| ☐ The amendment(s) was/were appromist be separately provided for e | oved by the sharehold ach voting group enti | ders through voting groups. The follo- itled to vote separately on the amenda | wing statement nent(s): |
| "The number of votes cast fo | or the amendment(s) | was/were sufficient for approval | |
| by | | ." | |
| | (voting group) | | |
| 12/15/2024 Dated | | | |
| Signature /s/ Mic | chael Nonahal | | |
| (By a dire selected, | | ner officer - if directors or officers had if in the hands of a receiver, trustee. of duciary) | |
| , | Michael Nonahal | | |
| - | (Typed or r | printed name of person signing) | 8 2 |
| I | President | | 2025 |
| | (Title of pe | rson signing) | JAN -7 PH |
| | | | PH 2: 4 OF STA |