P24000042002

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



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SECRETARY OF STATE
TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | ORATION: KALEY RAN INC | Ĉ | | | |
|--|---|--|---|--------------------|-------------|
| DOCUMENT NUM | D14000042002 | | | | |
| The enclosed Article | es of Amendment and fee are su | abmitted for filing. | | | |
| Please return all corr | respondence concerning this ma | atter to the following: | | | |
| | NURUN NABI | | | | |
| | | Name of Contact Perso | | <u></u> | |
| | KALEY RAN INC | | •• | | |
| | | | | | |
| | 1901 TALLOKAS AVE | | | | |
| | | Address | | | |
| | ORLANDO, FL 32805 | | | | |
| | · · · · | City/ State and Zip Coo | le | | |
| | KALEYRANINC@GMAIL. | СОМ | | | |
| | E-mail address: (to be us | sed for future annual report | t notification) | | |
| For further informati NURUN NABI | on concerning this matter, pleas | 407 | 369-1511 | SEC | 2024 |
| Name | of Contact Person | Area Co |)) de & Daytime Telephone Nun | nber ⊑ ∺ | |
| Enclosed is a check f | or the following amount made | | | TARY OF AHASSER | 2024 AUG 23 |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | OF STATE | PH 3: 42 |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Ameno Divisio The C 2415 Y | Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303 | | |

Articles of Amendment to Articles of Incorporation of

| 17 | 4 | г | 773 | , | n | A | N.T. | INC |
|----|---|---|-----|---|---|----|------|-------|
| ĸ | | | 1 1 | | к | 41 | - 2 | Livit |

| RALLI RANING | | | | . <u>-</u> |
|--|-------------------------|--|------------------------------|--|
| (Name of Corpo | oration as currently | filed with the Flor | i <u>da Dept, of State</u>) | |
| P24000042002 | | | | |
| (D | ocument Number of | Corporation (if knov | vn) | |
| Pursuant to the provisions of section 607,1006, Flits Articles of Incorporation: | lorida Statutes, this F | lorida Profit Corpo | ration adopts the follow | wing amendment(s) t |
| A. If amending name, enter the new name of t | he corporation: | | | |
| | | | | The new |
| name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," ' "chartered," "professional association," or the c | Inc." or "Co". A | | | |
| B. Enter new principal office address, if applic | cable: | | | |
| (Principal office address <u>MUST BE A STREET</u> | | | | |
| | | | | |
| | | | | |
| | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) | F ROX1 | | | |
| 1.71 1.71 1.71 1.71 1.71 1.71 1.71 1.71 | L BUX | | | |
| | | | | |
| | | | | |
| | | | | |
| D. If amending the registered agent and/or res | | <u>ss in Florida, enter</u> | the name of the | |
| new registered agent and/or the new registe | ered office address: | | | 2024 AUG SECRETI TAHLA |
| Name of New Registered Agent | | | | MAUG 23 PH CRETARY OF TAHLAHASSE |
| | | | | LAL LAL |
| | (Florida stree | address) | | - [[[[] |
| | , | | | PH SSE |
| New Registered Office Address: | | V-, 3 | , Florida | <u>π π</u> ω |
| | ((| Tip) | {2 | ip Codes |
| | | | | - 1 2 2 |
| | | | | |
| New Registered Agent's Signature, if changing I hereby accept the appointment as registered ago | | th and accent the ol | digations of the positio | 1 77 |
| in more of the approximent as regimered age | m. rum juminur wi | m unit accept the be | nigations by the positio | 71. |
| | | | | |
| | | | | |
| | Signature of New Rey | | นกงากง | — |
| | | and the same of th | '''a''' a | |
| Cheek if applicable | | | | |

 \Box 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)

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.

| Example: X Change | <u>PT</u> | John Doc | |
|----------------------------|-----------|----------------|-----------------------------|
| X Remove | V | Mike Jones | |
| _X Add | <u>SV</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | VP | ASHIKUR ZZAMAN | 205 DOVETAIL CT |
| X Add | | | APOPKA, FL 32703 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | 2024 AUG SECRET TALLA |
| Add | | | AUG 23 ALLAHV |
| Remove | | | |
| 5) Change | | | |
| Add | | | TATE |
| Remove | | | |
| 6) Change | | _ | |
| Add | | | |

| date this document was signed. | adoption: | , if other than the |
|--|---|--|
| iate 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 locument's effective date on the | s block does not meet the applicable statutory filing requirements, this date to Department of State's records. | will not be listed as the |
| adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors without shareholder action a | and shareholder |
| The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| The amendment(s) was/were a must be separately provided for | pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes car | st for the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| | | |
| | 119/24 | |
| Signature | anah. | |
| select | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary) | 2024 AUG SECRET |
| | NURUN NABI | MANG 23 PH 3 ECRETARY OF S TALLAHASSEE |
| | (Typed or printed name of person signing) | 玉龙 3 [|
| | | ω : \pm (1) |
| | PRESIDENT | OF ST. C. |