P9300070923

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2018 APR 23 PM 3: 2
SECRETARY OF STATI

C. GOLDEN APR 2 5 2010

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MIAMI LAKES O	FFICE CENTER INC	
DOCUMENT NUMB	ER: P93000076923	_	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	KHAWAR S. ABBAS		
-		Name of Contact Person	1
-		Firm/ Company	
:	20200 W DIXIE HWY, STE	1204	
	MIAMI, FL 33180	Address	
-		City/ State and Zip Cod	e
HOW	ARD.ABBAS@AVANTCAI	PITAL.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, please	se call:	
KHAWAR ABBAS		at (<u>305</u>	867-2274
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
\$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)
Ame Divis P.O.	ing Address Indment Section Ission of Corporations Box 6327 hassee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED

MIAMI LAKES OFFICE CENTER INC		2018 APR 23 PM 3: 27
(Name of Corporati	ion as currently filed with the Florida De	ept. of State)
P93000076923	•	SECRETARY OF STATE
/Decum	ment Number of Corporation (if known)	TALLAHASSEE, FLORIDA
. (Docum	ment Number of Corporation (II known)	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	o," "Inc," or "Co". A professional corpo	porated" or the abbreviation
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered		ame of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
new Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg	gistered Agent:	
I hereby accept the appointment as registered agent.		ons of the position.
Sign	nature of New Registered Agent, if changing	g

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 <math>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	1	
X Remove	<u>v</u>	Mike Jon	<u>es</u>	
X Add	<u>sv</u>	Sally Smi	i <u>th</u>	
Type of Action (Check One)	<u>Title</u>]	<u>Name</u>	<u>Addres</u> s
1) Change	D		HOWARD ABBAS	20200 W DIXIE HWY
Add				STE 1204
X Remove				MIAMI, FL 33180
2) Change	D	_	KHAWAR S. ABBAS	20200 W DIXIE HWY
X Add				STE 1204
Remove				MIAMI, FL 33180
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_ 		
Add				
Remove				

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f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares.
f an amendment provides for an exch provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 4/11 /2018	
Dated 4/11 /2018 Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other courappointed fiduciary by that fiduciary)	
11. ABISA 5 (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
TARECTOR	

(Title of person signing)