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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Orlando Antique Exchange
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Safa Masy 1 Name of Contact Person
Orlando Antique Exchange
6400 South Orange AVENUE
Orlando / FL / 32809 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Safa Masri at 407 376-9647  Name of Contact Person Area Code & Daytime Telephone Number
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.
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment

## to Articles of Incorporation

FILED

Ar	rticles of Incorporation	
Ordendo Madia	of	Tim DEC -3 P & W
Name of Corneration	as correctly filed with th	
PO POOCO	Z5(115	Follows Above the
		Manager Fill High
(1x)cumer	nt Number of Corporation (	ii kiiown)
resuant to the provisions of section 607,1006, Florida S Articles of Incorporation.	tatutes, this Florida Profit	Corporation adopts the following amendments
If amending name, enter the new name of the corp	ooration:	
		The new
ime must be distinguishable and contain the word "orp.," "Inc.," or Co.," or the designation "Corp," ord "chartered," "professional association," or the ab	"Inc," or "Co". A profe	" or "incorporated" or the abbreviation
Enter new principal office address, if applicable:		
rincipal office address <u>MUST BE A STREET ADDR</u>	ESS )	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	·	
	<u> </u>	
If amending the registered agent and/or registered		, enter the name of the
new registered agent and/or the new registered of	fice address:	
Name of New Registered Agent	<del></del>	
	(Florida street address)	
New Registered Office Address:		, Florida
THE THE STATE OF T	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Regist wreby accept the appointment as registered agent. I a		t the abligations of the maritim
метелу ассері іне арронитені as registerea agent. Та	ин затише жип ипа ассері	the originant of the position.
Signatu	tre of New Registered Agen	et if 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)

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: XChange	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	P	Ahmad Ma	
Add			Orlando, FL. 32805
Remove			
2) Change	<del></del>		
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			1
Remove			
6) Change			!
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
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an amendment provides for an eych	ange, reclassification, or cancellation of i	ssued shares,	
provisions for implementing the amer	ange, reclassification, or cancellation of i	ssued shares, t itself:	
an amendment provides for an exchorovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of i denent if not contained in the amendmen	ssued shares, t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of i denent if not contained in the amendmen	t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of independent if not contained in the amendment	t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of independent if not contained in the amendmen	t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of indepent if not contained in the amendmen	t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of indepent if not contained in the amendmen	t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of independent if not contained in the amendmen	t itself:	
provisions for implementing the amer	ange, reclassification, or cancellation of independent if not contained in the amendmen	t itself:	

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records	will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 11/28/2018	1
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 court	
appointed fiduciary by that fiduciary)	
Safa Masri	
(Typed or printed name of person signing)	1
President	
(Title of person signing)	