# V20614

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Amendment 06-19-09 DC

### **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORI	PORATION:	Ibrahim Corporation		
DOCUMENT NU	CUMENT NUMBER: V20614			
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	·	
Please return all co	orrespondence concerning thi	s matter to the following:		
		John P Miller		
	N	ame of Contact Person		
	Joh	nn P Miller CPA PA		
		Firm/ Company		
2499 Glades Rd Ste 304				
Address				
	Boo	ca Raton, FL 33431		
		ity/ State and Zip Code	<del></del>	
	jpmcpaj E-mail address: (to be use	pa@bellsouth.net d for future annual report notification)		
For further inform	ation concerning this matter,	please call:		
	John P Miller		68-9777	
	e of Contact Person	Area Code & Daytime Tel		
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tment of State:	
☑ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$\begin{align*} \$43.75 \text{ Filing Fee & Certified Copy} (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	le	

Tallahassee, FL 32301

### **Articles of Amendment** to Articles of Incorporation of

Ibra	ıhim Corporati	on		
(Name of Corporation as c	urrently filed with	the Florida Dept.	of State)	
	V20614			50.0
(Document l	Number of Corporat	tion (if known)		74
tursuant to the provisions of section 607. mendment(s) to its Articles of Incorporation		tes, this <i>Florida P</i>	rofit Corporation	adopts the following
. If amending name, enter the new nam	<u>ie of the corporation</u>	on:		•
				The new
ame must be distinguishable and conta bbreviation "Corp.," "Inc.," or Co.," or ame must contain the word "chartered," '	the designation "C 'professional associ	Corp," "Inc," or "Cation," or the abbr	Co". A profession eviation "P.A."	orated" or the nal corporation
B. Enter new principal office address, if		<u>20843 Via Ma</u>	<u>deira</u>	
Principal office address <u>MUST BE A STR</u>	(EEI ADDKESS)	Boça Raton, F	L 33433	
		,		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		20843 Via Mac	eira	
		Boca Raton, Fl	_ 33433	
D. If amending the registered agent and/ new registered agent and/or the new i			a, enter the name	of the
Name of New Registered Agent:	Sobhy G Ibra	ahim		
	20843 Via M	ladeira		
New Registered Office Address:		ida street address)		
	Boca Raton		, Florida 3	3433
	(City)	)	(Zip Code)	
ew Registered Agent's Signature, if cha	nging Degistered /	Agant:		
hereby accept the appointment as register			ot the obligations	of the position.
	<u>ک ک ک</u>	INOUL-		
	Signature of New	Registered Agent,	ij changing	

Page 1 of 5

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
D	Ganet Ibrahim	20843 Via Madira Boca Raton, FL 33433	□ Add ☑ Remove
<u>D</u>	Maha S. Ibrahim	20843 Via Madira Boca Raton, FL 33433	
<u>D</u>	Mary S. Ibrahim	20843 Via Madira Boca Raton, FL 33433	
	ing or adding additional Articles ditional sheets, if necessary). (B		
provisio		ge, reclassification, or cancellation of nent if not contained in the amendme	

## 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
DP	Jeannette M. Ibrahim	20843 Via Madeira Boca Raton, FL 33433	☑ Add □ Remove
<u>DS</u>	Maha S. Ibrahim	20843 Via Madeira Boca Raton, FL 33433	☑ Add □ Remove
DT	Mary S. Ibrahim	20843 Via Madeira Boca Raton, FL 33433	
	ding or adding additional Articles, endditional sheets, if necessary). (Be s		
provis	mendment provides for an exchange ions for implementing the amendme not applicable, indicate N/A)		

### 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)

(Attach	aaaiiionai	sneets,	ij	necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
D	Mona S. Ibrahim	20843 Via Madira ☐ Add Boca Raton FL 33433 ☐ Remov	
DVP	Mona S. Ibrahim	20758 Concord Green Dr W Boca Raton FL 33433	_ ☑ Add _ □ Remove
(attach a	additional sheets, if necessary). (Be	e specific)	
provis	mendment provides for an exchangions for implementing the amendment applicable, indicate N/A)	ge, reclassification, or cancellation of i ent if not contained in the amendmen	ssued shares, t itself:

The date of each amendment(	s) adoption: June 8th, 2009
• •	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
The amendment(s) was/wer must be separately provided	e approved by the shareholders through voting groups. The following statemer d for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated June	8th, 2009
Signature	5. 6. Flrah
(By	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Sobhy G. Ibrahim
	(Typed or printed name of person signing)
	Director
	(Title of person signing)