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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : ALBER TAX ACCOUNTANT

Account Number : I20150000098 Phone : (305)713-9142

Fax Number : (815)550-9948

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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Articles of Amendment to Articles of Incorporation σſ

2025 FEB 24 PH 1: 33

CECRETARY OF STATE.

ied with the Florida Dept. of State) proporation (if known) rida Profit Corporation adopts the following amendment(s) to
rida Profit Carporation adopts the following amendment(s) to
Fhe new
pany, "or "incorporated" or the abbreviation "Corp.," rofessional corporation name must confute the word
708 SW 17TH AVE
MIAMI FI, 33135
*/
708 SW 17TH AVE
MIAMI FL 33135
s in Florida, enter the name of the
t address) 33135
Florida Zip Code)
(24, C000)
ith and accept the abligations of the position.
gistored Agent, if changing

Check if applicable \square The amendment(s) is are being thed pursuant to s. 607.6420 (44) (6), F.S.

From: JUAN ALBEF

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:

X Change	<u>PT</u>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	P	SELKHI, SHADI	708 SW 17TH AVE
Add			MIAMI FL 33135
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove		_	
4) Change			
Add			
Remove		_	
5) Change			
Add			
Remove			
O Change			
Add			<u> </u>
Remove		_	· · · · · · · · · · · · · · · · · · ·

	
	-
[an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	
	<u></u>

The dute of each amendment(s) adoption:, if oth	ier than the
date this document was signed.	
02/21/2025	
Effective date if upplicable: (no more than 20 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	isted as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sharehol action was not required.	.der
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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
hy.	
by	
02/21/2025	
Dated	
$\sim \sim $	
Signature Y (By a director, president or other officer - if directors or officers have not been	
(By a director, president or other other others of a receiver, mustee, or other court selected, by an incorporator—if in the hands of a receiver, mustee, or other court	
appointed fiduciary by that fiduciary)	
SHADI SELKHI	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	