

P13000031917

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(Requestor's Name)

\_\_\_\_\_  
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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

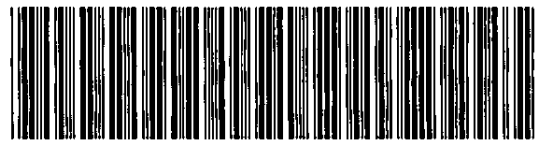
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
13 DEC -2 PM 12:51

DEC 09 2013  
T. CARTER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** American Prairie, Inc.

**DOCUMENT NUMBER:** P13000031417

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dr. L. Allan Austin

Name of Contact Person

American Prairie, Inc.

Firm/ Company

2263 West New Haven Avenue

Address

West Melbourne, FL 32904

City/ State and Zip Code

allanaustin@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. L. Allan Austin at ( 407 ) 923-1133

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:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

13 DEC -2 PM 12:51

**American Prairie Financial Processing, Inc.**

(Name of Corporation as currently filed with the Florida Dept. of State)

**P13000031417**

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

**American Prairie, Inc.**

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

2263 West New Haven Avenue

**West Melbourne, FL**

**32904**

**C. Enter new mailing address, if applicable:**  
(Mailing address **MAY BE A POST OFFICE BOX**)

2263 West New Haven Avenue

**West Melbourne, FL**

**32904**

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

(Florida street address)

\_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
*Signature of New Registered Agent, 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:**

Change                      PT      John Doe

Remove                        V        Mike Jones

Add                                SV      Sally Smith

| <u>Type of Action</u><br>(Check One)   | <u>Title</u> | <u>Name</u>                | <u>Address</u>   |
|--|--------------|----------------------------|--|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>C</u>     | <u>Greg Bair</u>           | <u>1800 Harrison Street</u><br><u>Titusville, FL</u><br><u>32780</u>       |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>C</u>     | <u>Osama Ayyoub</u>        | <u>1800 Harrison Street</u><br><u>Titusville, FL</u><br><u>32780</u>       |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>VC</u>    | <u>Hamad al Magawhi</u>    | <u>1800 Harrison Street</u><br><u>Titusville, FL</u><br><u>32780</u>       |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>VC</u>    | <u>Mohammed al Rashidi</u> | <u>1800 Harrison Street</u><br><u>Titusville, FL</u><br><u>32780</u>       |
| 5) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>D, S</u>  | <u>Dr. Sharon Dunn</u>     | <u>2263 W. New Haven Ave.</u><br><u>West Melbourne, FL</u><br><u>32904</u> |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>P</u>     | <u>L. Allan Austin</u>     | <u>1800 Harrison Street</u><br><u>Titusville, FL</u><br><u>32780</u>       |

**E. If amending or adding additional Articles, enter change(s) here:**  
*(Attach additional sheets, if necessary). (Be specific)*

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**F. If 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)*

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Adoption of Amendment(s) (CHECK ONE)**

The amendment(s) was/were adopted by the shareholders. The number of votes cast 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  
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 November 25, 2013

Signature L. Allan Austin

(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)

L. Allan Austin  
(Typed or printed name of person signing)

President  
(Title of person signing)