

11/16/21, 11:42 AM

Division of Corporations

A2100000490
 Florida Department of State
 Division of Corporations
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To:

Division of Corporations
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**LP/LLP AMENDMENT/RESTATEMENT/CORRECTION
 SHANTHY INVESTMENT LP**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$52.50

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SECRETARY OF STATE

SECRETARY OF STATE
 TALLAHASSEE, FL 32399

2021 NOV 16 PM 2:40

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHANTHY INVESTMENT LP

Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

EMERSON CORREA

Contact Person

ICONNECT SOLUTIONS CORP

Firm/Company

6735 CONROY ROAD STE 309

Address

ORLANDO, FL 32835

City, State and Zip Code

CONTACT@ICONNECTSC.COM

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

For further information concerning this matter, please call:

EMERSON CORREA at (407) 863 0096

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CERTIFICATE OF AMENDMENT
TO
CERTIFICATE OF LIMITED PARTNERSHIP
OF

SHANTHY INVESTMENT LP

Insert name currently on file with Florida Department of State

Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 09/10/2021, assigned Florida document number A2100XXXX190, adopts the following certificate of amendment to its certificate of limited partnership.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited partnership or limited liability limited partnership here:

New name must be distinguishable and contain an acceptable suffix.

*Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

B. If amending mailing address and/or principal office address, enter new mailing address and/or principal office address here:

New Principal Office Address: _____
(Must be STREET address)

New Mailing Address: _____
(May be post office box)

C. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____
City Zip Code

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SECRETARY OF STATE
TALLAHASSEE, FL 32310
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AND
FILED

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	SHANTHARUBY ANANDAMOORTHY	15 BUSCH AVENUE MARKHAM, ONTARIO, CA L6C 0-W4 CA	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
_____	POORANAKUMAR THURAIKUMAR	25 LORNA RAE BLVD SCARBOROUGH ON CA M1V 2C7	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing "limited liability limited partnership" status, all general partners must sign this amendment.)

F. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

REMOVING MEMBER SHANTHARUBY ANANDAMOORTHY

ADDING MEMBER POORANAKUMAR THURAISAMY

Effective date, if other than the date of filing:

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature(s) of a general partner or all general partners*:

(*NOTE: Only one current general partner is required to sign this document unless the limited partnership is adding or removing a "limited liability limited partnership" election statement. Chapter 620, F.S., requires all general partners to sign when adding or removing a "limited liability limited partnership" election statement.)

POORANAKUMAR THURAISAMY

X *Pooranakumar Thuraiamy*

Signature(s) of all new or dissociating general partner(s), if any:

SHANTHARUBY ANANDAMOORTHY

X *Shantharuby Anandamoorthy*