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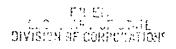
COVER LETTER

TO:	Amend	ment	Section	
	Divisio	n of C	Corporati	ons

NAME OF CORPOR	ATION: YAS+	H CONSULTIN	4, INC	
NAME OF CORPORATION: YASHI CONSULTING, INC. DOCUMENT NUMBER: PØ2ØØØØ 33256				
	of Amendment and fee are sub			
Please return all corres	pondence concerning this mat	ter to the following:		
Thiru Bujala Name of Contact Person Yashi Consulting INC Firm/Company				
-				
-	2	LEE G Address		
-	V [011	City/ State and Zip Code	0	
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Thi Byala at (800) 284 36 7 2 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	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mail	ing Address		Address	

Amendment Section Division of Corporations 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 of



16 FEB -2 PM 2: 15

YASH CONSULTING,	INC
_	currently filed with the Florida Dept. of State)
PØ2\$\$\$\$ 33256	umber of Corporation (if known)
(Document Nu	umber of Corporation (II known)
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	tes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new name of the corporate	tion:
	The new
name must be distinguishable and contain the word "cor". "Inc.," or Co.," or the designation "Corp," "Inc word "chartered," "professional association," or the abbrev	rporation." "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the viation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	1909 HILLBROOKE TRL
	SUTTE 4, THIAHASSEE FL 32311
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	21 LEE CT
	PLAINSBORD NT 08536
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
4.0	UA RA-LUPALLE
•	
	og HILBROOKE TRL #4 '
New Revistered Office Address: ###	TALLA HAKSEE Florida 32311
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	
A	Live
	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: X Change	<u>PT</u>	John Doc	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	P	ARUNA BALUPALII	PLAINS RORD NJ 08536
Remove			
2) <u> </u>	W.P	THRU BUTBLA	21 LEE CO OLAHOUSROND NJ 08536
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add Remove			
6) Change Add			

If amending of Attach addition	or adding additions onal sheets, if necess	al Articles, enter change(s) l sary). (Be specific)	<u>iere</u> :			
	<i>'</i>	NA -				
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				Lupan		A. A
						
			-t-to-rum .	- 44-4 4-44-4		
	-					174-to-144-page
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				···········		
provisions f	ment provides for a for implementing the pplicable, indicate N	n exchange, reclassification e amendment if not contain WA)	, or cancellated in the am	tion of issued s endment itself:	hares,	
	ARUNA	BALUPAL LI		51%	OF.	SHARES
	THIEV	BUTALA		497.	OF_	SHARES

The date of each amendment(s) adoption	: 1/1/2016	DIVI Giffother than the CR
date this document was signed.		20 10 10 10 10 10 10 10 10 10 10 10 10 10
Effective date if applicable:	(no more than 90 days after amendment file	16 FEB -2 PM 2: 15
	(no more than 90 days after amendment file	edate)
Note: If the date inserted in this block do document's effective date on the Departmen	ses not meet the applicable statutory filing requirent of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the for approval.	ne amendment(s)
	by the shareholders through voting groups. The foi toting group entitled to vote separately on the ame	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	;
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and	shareholder
Dated V	1/2016	
	1/2016 fut	
Signature	77	- All the - American -
	president or other officer – if directors or officers incorporator – if in the hands of a receiver, truste	
	ciary by that fiduciary)	c. of other court
	711	
	(Typed or printed name of person signing)	All forms and the first transfer for the firs
	(Typed of printed name of person signing)	
	VILE PRESIDEN	Λ
	(Title of person signing)	