## DO8 000082918

(Re	equestor's Name)		
(Ad	dress)		
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SUCCETARY OF STATE STATE AND A MARKET STATE

MAY 1 6 2016

C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ADITYA INVESTMENT INC				
DOCUMENT NUM	P08000082918			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this mat	tter to the following:		
	PAYAL PATEL			
		Name of Contact Persor	1	
	ADITYA INVESTMENT IN	C		
		Firm/ Company		
	1261 EGLIN PARKWAY. U	•		
			3 '	
•	Address			
	SHALIMAR, FL 32547.			
		City/ State and Zip Code	•	
PAY	ALYP@YMAIL.COM			
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
PAYAL PATEL		at ( <u>850</u>	5029608	
Name of Contact Person at () Area Code & Daytime Telephone Number		de & 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.C	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	0	of Control of the Con		
ADITYA INVESTMENT INC				
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)		
P08000082918				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the follo	wing amendme	ent(s)
A. If amending name, enter the new na	ame of the corporation:			
			The new	v
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or th "Co". A professional corporation name m "PA"	ne abbreviation	1
		N/A		
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS )			
(Trincipal office address serves	TREET TIPE TIESS )			~
			27 (A)	20
			2.2	MAY
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	35	
(	<del></del>	···	<u> </u>	∾
				Ř
		<del> </del>		3
D. If amending the registered agent ar	nd/or registered office add	dress in Florida, enter the name of the	ŞH.	59
new registered agent and/or the ne				
Name of New Registered Agent	N/A			
	(Florida s	treet address)		
)	N/A	Dis!.		
New Registered Office Address:		, Florida, (City)	Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agen	<u>ıt:</u>		
I hereby accept the appointment as regist	tered agent. I am familiar	with and accept the obligations of the position	on.	

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 <math>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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	v	ROOTU SHAH	911 ASHBURN STREET
X Add			HERNDON, VA 20170
Remove			
2) Change	<del> </del>		
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
J/A	
•	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
I/A	

The date of each amendment date this document was signed		, if other than the
_	05/07/2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	· · · · · · · · · · · · · · · · · · ·
	this block does not meet the applicable statutory filing requirements, this defined bepartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(ere sufficient for approval.	s)
	re approved by the shareholders through voting groups. The following statem ed for each voting group entitled to vote separately on the amendment(s):	ent
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	re adopted by the board of directors without shareholder action and sharehold	er
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated	05/07/16	
Signature	faxal	
(E si	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	PAYAL PATEL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	