

F18000002505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

(Document Number)

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2020 OCT -8 PM 1:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 11 2020

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Jay & Vivek Corporation

Name of Corporation

DOCUMENT NUMBER: F1800002505

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kalpesh Patel

Name of Contact Person

Jay & Vivek Corporation

Firm/Company

3598 W US Highway 90

Address

Lake City FL 32055

City/State and Zip Code

kalpesh1260@gmail.com

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

For further information concerning this matter, please call:

Kalpesh Patel

Name of Contact Person

at (606-271-2218

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$35 Filing Fee

\$43.75 Filing Fee &
Certificate of Status

\$43.75 Filing Fee &
Certified Copy

\$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

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

Street Address:

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

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F18000002505

(Document number of corporation (if known))

1. Jay & Vivek Corporation

(Name of corporation as it appears on the records of the Department of State)
2. Alabama

(Incorporated under laws of)
3. 5/25/2018

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____
5. _____
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
- (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) _____
6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

2020 OCT -8 PM 1:48
FILED

8. 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:

Name of New Registered Agent _____

(Florida street address)

New Registered Office 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

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

STATE OF ALABAMA

I, John H. Merrill, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Jay & Vivek, Corporation was formed in Mobile County, Alabama on December 14, 2005. The Alabama Entity Identification number for this entity is 244-667. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



20200929000024738

In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

09/29/2020

Date

John H. Merrill

Secretary of State

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(Florida street address)
- New Registered Office 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

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

| <u>Title/ Capacity</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|------------------------|-------------------------|-----------------------------|---|
| <u>Officer</u> | <u>Mitun D. Patel</u> | <u>3598 W US Highway 90</u> | <input checked="" type="checkbox"/> Add |
| | | <u>Lake City FL 32055</u> | <input type="checkbox"/> Remove |
| <u>Officer</u> | <u>Dinesh Patel</u> | <u>3598 W US Highway 90</u> | <input checked="" type="checkbox"/> Add |
| | | <u>Lake City FL 32055</u> | <input type="checkbox"/> Remove |
| <u>Officer</u> | <u>Shilpaben S Amin</u> | <u>2029 Bourbon St</u> | <input checked="" type="checkbox"/> Add |
| | | <u>Foley AL 36535</u> | <input type="checkbox"/> Remove |
| <u>_____</u> | <u>_____</u> | <u>_____</u> | <input type="checkbox"/> Add |
| <u>_____</u> | <u>_____</u> | <u>_____</u> | <input type="checkbox"/> Remove |
| <u>_____</u> | <u>_____</u> | <u>_____</u> | <input type="checkbox"/> Add |
| <u>_____</u> | <u>_____</u> | <u>_____</u> | <input type="checkbox"/> Remove |

0. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Kalpesh Patel

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Kalpesh Patel

(Typed or printed name of person signing)

Director, Chairman

(Title of person signing)

FILING FEE \$35.00

John H. Merrill
Secretary of State

P.O. Box 5616
Montgomery, AL 36103-5616

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