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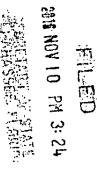
(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Sonana Systems, l	Inc.	
DOCUMENT NUM	F98759 BER:		
The enclosed Articles	s of Amendment and fee are su	ubmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	JD Nana		
		Name of Contact Pers	son
	Sonana Systems, Inc.		
	P.O. Box 2340	Firm/ Company	
	Windermere, FL 34786	Address	- ····
		City/ State and Zip Co	ode
: sona	nasystemsinc@gmail.com		
·	E-mail address: (to be us	sed for future annual repo	ort notification)
For further information	on concerning this matter, pleas	321	206-6768
Name	of Contact Person	at (Area (Code & Daytime Telephone Number
Enclosed is a check fo	or the following amount made		•
■ \$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.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amer Divis Clifto	et Address Indiment Section It is is in a contract of the cont

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Sonana Systems, Inc.			
	of Corporation as cur	rently filed with the Florid	a Dept. of State)
F98759			
	(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes,	this Florida Profit Corpora	ation adopts the following amendment(s
A. If amending name, enter the new na	me of the corporatio	<u>n:</u>	
N/A			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," tion," or the abbrevial	or "Co". A professional of	
B. Enter new principal office address, (Principal office address MUST BE A ST			0 PA 3:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P.O. Box 2340	22
		Windermere, Florida	a 34786
D. If amending the registered agent an new registered agent and/or the new			he name of the
tune of the hegistered rigen	5020 Down Point La	ne	
	/E1^=:	da straet address	
New Registered Office Address:	Windermere		34786 , Florida
		(City)	(Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature, if cl I hereby accept the appointment as registe	(Florida) Windermere	da street address) (City) gent:	, Florida(Zip Code)
	Signatura of A	lew Registered Agent, if char	oging.

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> <u>John</u>	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
_X Add	SV Sally	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Presiden	KJ Nana	2407 West Vine Street
•			Kissimmee, FL 34741
Add X Remove			
2) Change	Presiden	JD Nana	P.O. Box 2340
X Add			Windermere, FL 34786
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) Unauthorized amended report filed fraudulenty on 11/3/2016 by KJ Nana aka Kaushik Nana is revoked.
Resignation of Kaushik Nana attached and he is subject to fraud, embezzlement, misappropriation of corporate
funds, denial of rights and requests, non payment of debts. These matters were addressed to KJ Nana
aka Kaushik Nana by email on June 2, 2016.
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) N/A

	April 07, 2016	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the De	plock does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
11/04/2016		
Dated		
- Sianatura C	trace-	
Signature CBy a c	irector, president or other officer – if directors or officers have not been	
selecte	d, by an incorporator - if in the hands of a receiver, trustee, or other court	
appoin	ted fiduciary by that fiduciary)	
	JD Nana	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	