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Division of Corporations

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: (850)617-6380

From:

Account Name : GULATI LAW

Account Number : I20130000014

Phone

: (407)900-5054

Fax Number

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SOUTH ASIAN BAR ASSOCIATION OF FLORIDA, INC.

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## COVER LETTER

Division of Corporations	
NAME OF CORPORATION:	SAR ASSOCIATION OF FLORIDA, INC.
N04000007503	¥
DOCUMENT NUMBER:	·
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this ma	tter to the following:
FARHEEN JAHANGIR	
	(Name of Contact Person)
	(Firm/ Company)
3101 NE 47TH COURT, UNIT 601	
	(Address)
FORT LAUDERDALE, FL 33308	
	(City/ State and Zlp Code)
SABAFLORIDA@GMAIL.COM	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, please	e cail:
FARHEEN JAHANGIR	631 384-9656 at
(Name of Contact Person	
Enclosed is a check for the following amount made p	ayable to the Florida Department of State:
図 \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed)  Cartificate of Status Certified Copy (Additional Copy is Enclosed)
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

## Articles of Amendment to Articles of Incorporation of

of	
SOUTH ASIAN BAR ASSOCIATION OF FLORIDA, INC.	
Name of Corporation as currently filed with the Florida Dent, of	State)
N0400007503	
(Document Number of Co	rporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this immendment(s) to its Articles of Incorporation:	Torida Not For Profit Corporation adopts the following
. Hameniling name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation" or "Connaity" or "Co," may not be used in the name.	"Incorporated" or the abbreviation "Corp." or "Inc."
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	<del></del>
	<del></del>
. If amending the registered agent and/or registered office address	ss in Florida, enter the name of the
now registered agent and/or the new registered office address:	
Name of New Registered Agent:	
N. Oustain LOM and Lower	(Florida street address)
New Registered Office Address:	
	Florida
(City,	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent:	•
hereby accept the appointment as registered agent. I am familiar w	th and accept the obligations of the position.
	Mar San Cin
Signature	of New Registered Agent, if changing

FILED SEP 29 AM 9: 06 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 os an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	शाहरू	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	<u>P</u>	MADHURIMA PATURI, ESQ.	1850 N. ALAFAYA TRAIL UNIT (A/)
Remove  2) Change     Add	<u>p</u>	FARHEEN JAHANGIR, ESQ.	ORLANDO FL 32826  3101 NE 47TH COURT  UNIT 601
Remove  3) Change  x Add Remove	<u>T</u> .	Shila Madhuri Jannu	FORT LAUDERDALE FL 33308 4106 W El Prado Blvd. Tampa, FL 33629-8526
4) Change Add	<u>T</u>	Hashi Richards	PO BOX 770504 ORLANDO FL 32877
X Remove  5) Change Add			
6) Change Add	·		
E. If amending or addle (attach additional shee	ng additional Arti is, if necessory).	cles, enter change(s) here: (Be specific)	
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The date of each amendment(s) adopticate this document was signed.	on:	_ if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block dedocument's effective date on the Department	oes not meet the applicable statutory filing requirements, this date will not be nent of State's records.	ne listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated

09/17/2021

Signature

(By the chairmantor vice chairman of the board, president or other officer-if directors have not been selected, by antincorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

PARHEEN JAHANGIR

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2021 SEP 29 AM 5: 06