

N1100001116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

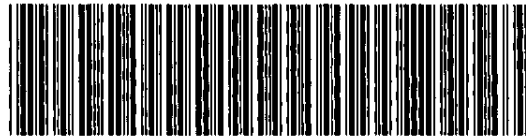
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rao Mylaravan
gave permission to
Add the 500(C3) Info
to Amend. Also the
new ps.
Returned
Bylaws.

Office Use Only



100240958291

10/19/12--01023--007 **43.75

RECEIVED
ALL INFORMATION
OCT 19 2012

12 OCT 19 PM 4:50

FILED

Amend
10-24-12
DC

DL
10-24-12

**Devi Temple of Florida
(EIN# 45-3958085)**

**Regd. Office:
8237 SW 51st Blvd
Gainesville, FL 32608
Tel: 352-318-2177 (cell)
352-377-8888 (Evening)
Email: rmylavar@gmail.com**

Date: October 18, 2012

To:
Amendment Section
Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madam:

Please find enclosed the Form and the list of amendments to the Articles of Incorporation and Bylaws for our Organization- Devi Temple of Florida (EIN 45-3958085), Gainesville, FL. Also attached please find the check for \$43.75 for filing these amendments with your Division and a certified copy.

We look forward to receiving a Certified Copy with these amendments applied to our Corporation's Articles of Incorporation. We will be happy to furnish any additional information that you may require in this regard. Thank you.

Sincerely,


Rao Mylavarapu

Registered Agent

Devi Temple of Florida

Tel: 352-318-2177 (cell)

Email: rmylavar@gmail.com

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Devi Temple of Florida

DOCUMENT NUMBER: EIN NO: 45-3958085

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rao S Mylavarapu

(Name of Contact Person)

(Firm/ Company)

8237 SW 51st Blvd

(Address)

Gainesville, FL 32608

(City/ State and Zip Code)

rmylavar@gmail.com

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

For further information concerning this matter, please call:

Rao Mylavarapu at 352 318-2177

(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:

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Devi Temple of Florida, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N11000011116

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. 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:

Rao S. Mylavarapu

8237 S.W. 51st Blvd.

(Florida street address)

New Registered Office Address:

Gainesville

(City)

Florida

32608

(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.

Rao mylavarapu 10/8/2012

FILED
12 OCT 19 PM 4:50
CLERK OF THE COURT
JACKSONVILLE, FLORIDA

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change	_____	<u>N/A</u>	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
2) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change	_____	_____	_____
<input type="checkbox"/> Add	_____	_____	_____
<input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

PLEASE ADD - EIN# 45-3958085

PURPOSE

This Corporation is organized exclusively for Religious and Charitable _____
purposes including for such purposes, the preserving, promoting, _____
supporting, fostering, and conducting of various religious rituals _____
educational and cultural activities connected with HINDU worship. _____

NON-PROFIT STATUS

No part of the net earnings of the Corporation shall ensure to the benefit
of, or be distributed to, its members, trustees, officers, or other private
persons, except that the Corporation shall be authorized and empowered
to pay reasonable compensation for services rendered and to make
payments and distribution in furtherance of the purpose set forth in Article
11 hereof. No substantial part of the activities of the Corporation shall be,
the carrying on of propaganda, or otherwise attempting to influence
litigation and the Corporation shall not participate in or intervene in
(including the publishing or distribution of statements) any political
campaign on behalf of any candidate for public office. Notwithstanding any
other provision of these articles, the Corporation shall not carry on any
other activities not permitted to be carried on

(a) By a Corporation exempt from Federal Income Tax under section 501 (c)
(3) of the Internal Revenue Codes or

(b) By a Corporation contribution to which are deductible under section _____
170(c) (2) of the Internal Revenue Code of 1954 or the corresponding _____
provision of any future United States Internal Revenue Law.

Dissolution

- This Corporation is organized exclusively for charitable, religious,
- educational and scientific purposes, including, for such purposes, the
- making of distributions to organizations that qualify as exempt
- organizations under section 501(c)(3) of the Internal Revenue Code, or
- corresponding section of any future federal tax code.
 - Upon the dissolution of the organization, assets shall be distributed to
- such other qualifying Hindu Organization or to organizations fostering
- Hindu faith, or to organizations operated exclusively for charitable,
- educational, religious, or scientific purposes or to one or more exempt
- purposes within the meaning of section 501(c)(3) of the Internal
- Revenue Code, or corresponding section of any future federal tax code,
- or shall be distributed to the federal government, or to a state or local
- government, for a public purpose. Any such assets not disposed of shall
- be disposed of by a court of competent jurisdiction in the county in
- which the principal office of the organization is then located, exclusively
- for such purposes or to such organization or organizations, as said Court
- shall determine, which are organized and operated exclusively for such
- purposes.
-
-
-
-

The date of each amendment(s) adoption: October 8, 2012

Effective date if applicable: Immediately
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ 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 October 18, 2012

Signature Chittur V Radhakrishnan
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

CHITTUR V. RADHAKRISHNAN
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)