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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	VYAS CHARITABLE FOU	NDATION, INC.	
N1100001 DOCUMENT NUMBER:	1509		
The enclosed Articles of Amendment a	nd fee are submitted for filing		
Please return all correspondence concer	ming this matter to the followi	ng:	
PORUS SAGAR			
<del></del> -	(Name of Cont	act Person)	-
VBRO GROUP, LLC			
	(Firm/ Cor	mpany)	
PO BOX 915201			
	(Addre	ess)	
LONGWOOD, FL 32791-5201			
	(City/ State and	l Zip Code)	
E-mail addre	ess: (to be used for future annu	ial report notification	on)
For further information concerning this	matter, please call:		
PORUS SAGAR		321-947-986 at	66
(Name of C	Contact Person)		(Daytime Telephone Number)
Enclosed is a check for the following a	mount made payable to the Flo	orida Department o	f State:
■ \$35 Filing Fee □\$43.75 Certific	Filing Fee & \$\sum \$\\$43.75 \text{ Filing} \text{ Certified Cop} (Additional cenclosed)	py Certi copy is Certi (Add	50 Filing Fee ficate of Status fied Copy litional Copy is losed)
Mailing Address Amendment Section Division of Corporati P.O. Box 6327	ons	Street Address Amendment Sec Division of Corp The Centre of	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

200 PM	
<u></u> :	J

## S & Z VYAS CHARITABLE FOUNDATION, INC.

(Name of Corporation as currently filed with the Florid	a Dept. of State)	25
N11000011509		
(Document Nur	mber of Corporation (if know	wn)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	tutes, this Florida Not For I	Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation SUREE & ZABY VYAS CHARITABLE FOUNDATION		Ti
name must be distinguishable and contain the word "corpo "Company" or "Co." may not he used in the name.	oration" or "incorporated"	The new or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	N/A	
(		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
D. If amending the registered agent and/or registered of		nter the name of the
new registered agent and/or the new registered offic	e address:	
Name of New Registered Agent: N/A		
New Registered Office Address:	(Floria	da street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		e obligations of the position.
	Signature of New Registere	ed 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 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 X Remove X Add	PT John Do V Mike Jo SV Sally Si	oe ones	NIA	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change Add				
Remove				
2) Change Add				
Remove 3 ) Change Add Remove				
4) Change Add				
Remove				<u> </u>
5) Change Add				
Remove				
6) Change Add				
Remove				
E. If amending or addir (attach additional shee		icles, enter change(s) here: (Be specific)		
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			-	
The date of each amendment(s) adopted date this document was signed.	on:			, if other than the
Effective date if applicable:		ys after amendment file		
	(no more than 90 da	ys after amendment file	e date)	
Note: If the date inserted in this block do document's effective date on the Departn	es not meet the applicant of State's records	cable statutory filing re	quirements, this date will	not be listed as the
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.

Dated	MAY 8, 2020
Signati	(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 count appointed fiduciary by that fiduciary)
	SURYAKANT VYAS
	(Typed or printed name of person signing)