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## COVER LETTER

TO: Amendment Section Division of Corporations	
Krishna West! Inc.	
N13000006649 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submittee	
Please return all correspondence concerning this matter to t	the following:
Robert S. Cohen	
(Nar	me of Contact Person)
Krishna West Inc	
	(Firm/ Company)
1515 NW 7th Place	
	(Address)
	(2001058)
Gainesville, FL 32603	
(City	y/ State and Zip Code)
bobcohen@ivs.edu	
E-mail address: (to be used for f	future annual report notification)
For further information concerning this matter, please call:	
Robert Cohen	352 514-5251 at
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Department of State:
Certificate of Status Ce (A	43.75 Filing Fee & □\$52.50 Filing Fee ertified Copy Certificate of Status Additional copy is Certified Copy nelosed) (Additional Copy is Enclosed)
<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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	ticles of Amendi to icles of Incorpor			RADE - C.
Krishna West! Inc.	of			
(Name of Corporation as currently filed with the Florid	da Dept. of State	<u>;</u> )		C.
N13000006649				*(
(Document Nu	imber of Corpora	ition (if know	n)	
Pursuant to the provisions of section 617,1006. Florida Stramendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation				
Krishna West, Inc.	In Acres	ic to	(D)R	1
<u>"Company" or "Co." may not be used in the name.</u> B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u> (Principal office address <u>MUST BE A STREET ADDRE</u> C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BON</u> )			chine	
D. <u>If amending the registered agent and/or registered and registered agent and/or the new registered office</u>	office address in	<u>Florida, ent</u>	er the name of th	<u>e</u>
<u>Name of New Registered Agent:</u>		<u>chan</u>	N	
<u>New Registered Office Address</u> :		Glorida	sweet address)	
			Florid	a
	(City)		(Zip	Code)

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<u>New Registered Agent's Signature, if changing Registered Agent:</u> *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

/

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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT</u> <u>John D</u> <u>V</u> <u>Mike J</u> SV Salty S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) <u>*</u> Change Add	PD	Robert S Cohen	1515 NW 7th Place Gainesville, FL 32603
Remove 2) Change Add	<u>DS</u>	Yonga Dimitrova Linkogle	303 East 4th Street Unit 4A Los Angeles, CA 90013
3) Remove Change Add <u>*</u> Remove	<u>D</u>	Govinda Sundara	
4) Change Add	VPD	Govinda DeCastro	2801 South Lakeline Blyd Apt 123( Austin, Texas 78612
Remove 5) Change <u> x</u> Add Remove	<u>[]</u>	Olympia Vitalia Morales	4342 W Point Loma Blvd #D Sand Diego, CA 92107
6) Change <u>*</u> Add	<u>D</u>	Shiyanand Sharma	Flat 42, Ventura House, 19 New Street
Remove E. <u>If amending or addir</u> (attach additional shee		<u>ticles, enter change(s) here</u> : Note: H (Be specific) d. rector He (Cm	Basingstoke, UK RG21 7BT loward Resnick 15 current and has no change, and has no change,

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The date of each amendment(s) adoption: August 1, 2020 \_\_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_

tho more than 90 days after amendment file dates

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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	August 1, 2020			
Signature	y m			
	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)			
	Robert Cohen			
	(Typed or printed name of person signing)			

President

(Title of person signing)