N14000005055

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations

Anahata Found	lation, Inc.
NAME OF CORPORATION:	
N1400005055	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	er to the following:
Kenneth Oliver Sergeant	
	(Name of Contact Person)
	(Fi / C
	(Firm/ Company)
8401 NW 17th St, Dept. 43-0495	
	(Address)
Miami, FL 33126	
	(City/ State and Zip Code)
anahatafoundation1@gmail.	com
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	call:
Kenneth Oliver Sergeant	310 795 1772 at (305) 320-3328
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Department of State:
\$35 Filing Fee \$\sum \text{\$\sum \$\\$43.75 Filing Fee & Certificate of Status}\$	
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

Anahata Foundation, Inc.

(Name of Corporation as currently filed with the Flor	rida Dept. of State)	mi This make
N1400005055	·	
		<u> </u>
(Document Number of Corpora	ition (if known)	70 m
Pursuant to the provisions of section 617.1006, Florida Statutes	s, this <i>Florida Not For Profit Corporation</i> a	idopts the following
amendment(s) to its Articles of Incorporation:		
A. If amending name, enter the new name of the corporation	on.	
A. It amending name, enter the new hathe of the corporation	<u>on.</u>	5 G
		The ne
name must be distinguishable and contain the word "corporate	ion" or "incorporated" or the abbreviation	"Corp." or "Inc.
"Company" or "Co." may not be used in the name.	·	
	5 9 60 NW 44th St, #504	
B. Enter new principal office address, if applicable:	5860	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Lauderniii, FL 33319	
		<u></u>
C. Enter new mailing address, if applicable:	8401 NW 17th St, Dept 43-0495	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	Miami, FL 33126	
D. If amending the registered agent and/or registered offic	e address in Florida, enter the name of th	<u>e</u>
new registered agent and/or the new registered office ac		
Kenneth Oliver	r Sergeant	
Name of New Registered Agent:	01 #504	
Name of New Registered Agent: 5860 NW 44th	St, #504	
50-4	(Florida street address)	
New Registered Office Address:		
Lauderhill	3331	9
	, Florida	
(City)	(Zip Code)	
New Begintened Access Circumstance is about a Decistered	A 1	
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fan	wiliar with and across the obligations of the	nasition
Thereby decept the appointment as registered again. I fam Jun	D. The spiritual of the	position.
() county		
Signature of New Regist	ered Agent, if changing	

Page 1 of 4

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	V Mik	n Doe se Jones sy Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	SD	Wendy Rodriguez	3918 Treetop Dr
Add			Weston, FL 33332
Remove			
2) Change	SD	Kenneth Oliver Sergeant	8401 NW 17th St, Dept 43 อฯริธ
X Add			Miami, FL 33126
Remove X 3) Change	PD	Bernard Saroop	8401 NW 17th St, Dept 43. 0495
Add			Miami, FL 33126
Remove			
X 4) Change	VD	Stephen Alibocus	8401 NW 17th St, Dept 43 ณ ๑๖๖
Add			Miami, FL 33126
Remove			
X 5) Change	TD	Anand Gosine	8401 NW 17th St, Dept 43 oun 5
Add			Miami, FL 33126
Remove			
X 6) Change	D	Hemraj Heerah	8401 NW 17th St, Dept 43 ง บ ุรุร์
Add			Miami, FL 33126
Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)
(and an analysis of the costs o	(be speegle)
· ·	
	· · · · · · · · · · · · · · · · · · ·
	111 181 1811 1888 1881
 	

Γhe	September 29, 2014 date of each amendment(s) adoption:	
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ado	option 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.	
	September 29, 2014 Dated	
	Signature	
	(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)	
	Anand Gosine	
	Treasurer (Typed or printed name of person signing)	
	(Title of person signing)	