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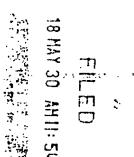
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Sya Rose Technolo	gy Nelwork Inc.
DOCUMENT NUMBER: N17000049	12
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Syantliyana A - Sadagapeel (Name of Contact Per	son)
2957 apital park Drive Sto	5
Tallahassee FL 32301 (City/State and Zip C	ode)
S. Sadage pul & Symmse com E-mail address (to be used for future annual repo	ort notification)
For further information concerning this matter, please call:	
Spartlygice Sadagapal at (Name of Contact Person)	850 - 459-0785 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida D	epartment of State:
S35 Filing Fee S43.75 Filing Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe	Certificate of Status
	eet Address endment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

Articles of Amendment to Articles of Incorporation of

Syg Rose Technology N (Name of Corporation as current	velweak	Inc.
(Name of Corporation as current	iv filed with the l	Florida Dept. of State)
N170000	04942	
(Document Numbe	r of Corporation (if known)
ursuant to the provisions of section 617.1006. Florida Statutes nendment(s) to its Articles of Incorporation:	, this <i>Florida Not</i>	For Profit Corporation adopts the following
If amending name, enter the new name of the corporation	<u>on:</u>	
		The new
ume must be distinguishable and contain the word "corporati Company" or "Co." may not be used in the name.	on" or "incorpor	cated" or the abbreviation "Corp." or "Inc."
sorphing to Co. may not be used in the name.		
Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDRESS</u>)		From 5
		<u> </u>
. Enter new mailing address, if applicable:		्री कुर्ते । ए जिल्हें । ए
(Mailing address MAY BE A POST OFFICE BOX)		• • • • • • • • • • • • • • • • • • • •
		, n
		2012 (
. If amending the registered agent and/or registered office new registered agent and/or the new registered office ac		ida, enter the name of the
new registered agent and/or the new registered office at	<u>141 C35.</u>	
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		
		Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered , hereby accept the appointment as registered agent. I am fan		cept the obligations of the position.
Si	gnature of New R	egistered 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: \underline{X} Change \underline{X} Remove \underline{X} Add	PT John I V Mike I SV Sally 5	<u>Iones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	D136(408	Aravinthan Jayakuman	ATBA Plantons Proje Por Tallahoussee FL 32311
2) Change Add	Director	Shaji Nair	16501 Forrest Lake Dr Tampa, FL- 33624
Remove 3) Change Add Remove		// / · / · / · · · · · · · · · · · · · 	
4) Change Add Remove			
5) Change Add			
Remove 6) Change Add Remove			

If amending or adding addictatach additional sheets, if no	itional Articles, en ecessary). (Be sp	iter change(s) her pecific)	r <u>e</u> :			
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The date of each amendment(s) adoption:	05/30	12018	_, if other than the
late this document was signed.			
Effective date if applicable:	05/30/2018		·
(no m	ore than 90 days after amendmer	ıt file date)	
Note: If the date inserted in this block does not redocument's effective date on the Department of S		g requirements, this date will not b	be listed as the
Adoption of Amendment(s) (CHI	ECK ONE)		
The amendment(s) was/were adopted by the was/were sufficient for approval.	: members and the number of vote	es cast for the amendment(s)	
There are no members or members entitled adopted by the board of directors.	to vote on the amendment(s). Th	e amendment(s) was/were	
Dated	218		
Signature Sycanthe	Jang Sadegopeel		_
have not been selected. I	chairman of the board, president by an incorporator – if in the hand duciary by that fiduciary)	or other officer-if directors Is of a receiver, trustee, or	
Syandia	Yana A. Sadegi (Typed or printed name of per	son signing)	
Board	Cittle of person sie	Foundasi	