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TO: Amendment Section Division of Corporations

r 'v 'v '

Tallahassee, FL 32314

NAME OF CORPORATION: $_$	aishnav Sangh of U	SA Inc				
N2100 DOCUMENT NUMBER:	0000019					
The enclosed Articles of Amendmo	ent and fee are subm	itted for filing.				
Please return all correspondence co	oncerning this matter	to the following:	:			
Amit Shah						
	(Name of Contact	Person)			
Vaishnav Sangh of USA Inc						
	· · · · · · · · · · · · · · · · · · ·	(Firm/ Compa	ıny)			
5733 N. Dean Rd.						
		(Address)	ľ			
Orlando, FL 32817						
	(City/ State and Z	ip Code)			
amitrima@msn.com						
E-mail:	iddress: (to be used)	for future annual	report no	ification)	
For further information concerning	this matter, please o	all:				
Carolyn Bailey			727		842-9105	
(Namo	of Contact Person)		(Area	Code)	(Daytime Teleph	ione Number)
Enclosed is a check for the followi	ng amount made pay	able to the Floric	la Departi	ment of S	State:	
-	3.75 Filing Fee & Ertificate of Status	□\$43.75 Filing For Certified Copy (Additional copencelosed)		Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Addres Amendment Sec Division of Corp P.O. Box 6327	tion	·	Street Ad Amendmo Division of The Cent	ent Section of Corpo		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

VAISHNAV SANGH OF USA INC

(Name of Corporation as currently filed with the Florida	Dept. of State)
N21000000019	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:
	The new
name must be distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>(2)</u>
	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-
(maning unaress MAT DE ATOST OFFICE BOX)	.;·
	
D. If amending the registered agent and/or registered off	fice address in Florida, enter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent:	
N. D 1000 411	(Florida street address)
New Registered Office Address:	
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	
I hereby accept the appointment as registered agent. I am fo	familiar with and accept the obligations of the position.
	Signature of New Registered Agent, if changing
•	G

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	<u>ones</u>	
Type of Action (Check One)	Title	Name	Address
1) Change Add	TRS	Bhupendra Shah	5733 N. Dean Rd. Orlando, FL 32817
Remove			
2) Change Add	<u>s</u>	Dhwani Shah	5733 N. Dean Rd. Orlando, FL 32817
X Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		icles, enter change(s) here: (Be specific)	

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- · · · · - ·		
		
The date of each amendment(s) addate this document was signed.	doption:	, if other than the
Effective date if analisables		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	ock does not meet the applicable statutory filing requirements, this date will n	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast for the amendment(s) al.	

(By the chairman of vice chairman of the board, president or other officer-if directed have not been selected, by an incorporator — if in the hands of a receiver, trustee, or the control of the hands of a receiver, trustee, or the control of the hands of a receiver, trustee, or the control of the hands of a receiver.	1.1	
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(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were