## N21000012230

(Re	equestor's N	ame)	
(Ad	ddress)		
(Ac	ddress)		
(CI	ty/State/Zip/	Phone #)	
PICK-UP	☐ WA	ıΤ	MAIL
(Be	usiness Entí	ty Name)	
(D-	ocument Nu	mber)	
Certified Copies	_ Certii	ficates of S	Status
Special Instructions to	Filing Office	er:	
J. H	IORNE		
VOin	1 U 2021		ì
			i

Office Use Only



100375445241

10/28/21--01012--014 \*\*52.50

FILED 2021 OCT 28 PH 5: 26 SECRE (AND 25 ) 33

## COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	A AND NANYANTAR	RA SARANGA	MATH INC
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this m	atter to the following:		
MALLIKARJUNA SWAMY			
	(Name of Contact Po	erson)	
MALLIKARJUNA AND NANYANTARA SARA	ANGAMATH INC		
	(Firm/ Company	y)	
7314 SAWGRASS POINT DR, 000			
	(Address)	· · · · · · · · · · · · · · · · · · ·	
PINELLAS PARK, FL US 33782			
	(City/ State and Zip	Code)	
KRJUNA48@GMAIL.COM			
E-mail address: (to be u	sed for future annual rep	ort notificatio	n)
For further information concerning this matter, ple	ase call;		
MALLIKARJUNA SWAMY	at	412	5266531
(Name of Contact Pers			(Daytime Telephone Number)
Enclosed is a check for the following amount made	e payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of State		Certit s Certit	0 Filing Fee leate of Status led Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ar Di	reet Address nendment Sect vision of Corp ne Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

2021 OCT 28 PH 5: 26

MALLIKARJUNA AND NANYANTARA SARANGAMATH INC

Name of Corporation as currently filed with the Floi	rida Dept. of State)	intraktagger, proj
N21000012230		
(Document S	Rumber of Corporation (if ki	nown)
Pursuant to the provisions of section 617.1006. Florida Sumendment(s) to its Articles of Incorporation:	itatutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corp	poration:	
MALLIKARJUNA AND NAYANTARA SARANGAN	IATH INC	The new
name must be distinguishable and contain the word "cor "Company" or "Co," may not be used in the name.	poration" or "incorporated	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	PESS )	
		·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	<del></del>	
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered of</li> </ol>		enter the name of the
new registered agent and/or the new registered of	nce address:	
Name of New Registered Agent:		
	(FI	orida street address)
New Registered Office Address:		
		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regist		
Thereby accept the appointment as registered agent. To	im familiar with and accept	the obligations of the position.
<del></del>	Signature of New Registe	ered 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	$\frac{\underline{PT}}{\underline{V}}$ $\underline{\underline{SV}}$	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
51 Change Add			
Remove			
6) Change Add			
Remove			
		onal Articles, enter change(s) here: essary). (Be specific)	
			<del></del>
			<del></del>
<u> </u>			

•		
		<del></del>
		<del></del>
		· <del></del>
		_ <del></del>
	· · · · · · · · · · · · · · · · · · ·	<del></del>
		_ <del></del>
		<del>'</del>
	<del></del>	
		<u> </u>
The date of each amendment(s) adoption:	OCTOBER 26, 2021	_, if other than the
date this document was signed.		_
Effective date if applicable: OCTOBER		
(1	no more than 90 days after amendment file date)	
	not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

adopted by the board	of directors.
() Dated	OCTOBER 26, 2021
Signatur	Emmallinung Sille
ha	y the chairman or vice chairman of the board, president or other officer-if directors are not been selected, by an incorporator – if in the hands of a receiver, trustee, or the hands of a proposited fiduciary by that fiduciary)
	MALLIKARJUNA SWAMY
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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