

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200293478692

01/28/17=-01017 --005 **35.00

m : 3

R. Valle



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 30, 2017

UDAY SETH 10420 W SAMPLE RD CORAL SPRINGS, FL 33065

SUBJECT: AUM-RAM, INC. Ref. Number: P00000116504

We have received your document for AUM-RAM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

It appears you have submitted the wrong form. The form you have submitted is for a Florida profit corporation to become a Florida profit benefit corporation. If you meant to file this form, then either page 3 or 4 must be completed in accordance with the appropriate statute. Otherwise, please find enclosed the correct form for filing articles of amendment.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 417A00001856

I hope the paperwork is filled out correctly.

Please call, if any quistions.

Thank you For you help. Sincurely. Wday Selh

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AUM-R	AM INC.		
DOCUMENT NUM	Pooo	0116504		
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	MDAY	SETH Name of Contact Person		
		•		
	D/B/A EAG	Firm/ Company SAMPLE Address	HERS	
		Firm/ Company		
	10420 Jal.	SAMPLE	ROAD	
	CORAL SPR	City/ State and Zip Cod	33065	
		City/ State and Zip Cod	e	
		anesed att. r	notification)	
For further information	on concerning this matter, pleas	se can:		
uday	Seth	at (954	ode & Daytimc Telephone Number	
Name	of Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
<u>M</u> :	ailing Address		Address	
Amendment Section		Amendment Section		
_ :	vision of Corporations	Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314			Executive Center Circle	
		ers 11 1	PR 20201	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

17	FES	13	ДV	٠,	
,			•	Ċ.	13

1.

filed with the Florida Dept. of State)
• •
:
Corporation (if known)
Florida Profit Corporation adopts the following amendment(s)
The new
n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
ress in Florida, enter the name of the
reet address)
, Florida
(City) (Zip Code)

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP/D	KOSHA SETH	11528 NW 28th DRIVE
Add			CORAL SPRINCYS, FL-
Remove			330 7 1
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		A4 544	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	cles, enter change (Be specific)			
				
				_
				<u> </u>
				
				····
	· ·			
			of insued above	-
			on or issued snare	
If an amendment provides for an exchange provisions for implementing the ame	iange, reclassifica indment if not con	ition, or cancenau	ndment itself:	-
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassificand ment if not con	ntained in the ame	ndment itself:	_
provisions for implementing the ame	nange, reclassifics andment if not con	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifics	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifies	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifics	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifies	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifics	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifies	ntained in the ame	ndment itself:	
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	nange, reclassifics	ntained in the ame	ndment itself:	
provisions for implementing the ame	nange, reclassifies	ntained in the ame	ndment itself:	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date widocument's effective date on the Department of State's records.	ll not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Uday Jelin	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
UDAY SETH	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	