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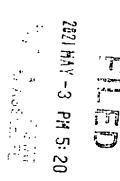


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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPO	DRATION: Maha Shakti Corpe	oration	
	IBER: P02000013243		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Mukund D Patel		
		Name of Contact Perso	n
		Firm/ Company	
	9241 Silverthorn Rd		
		Address	
	Largo, FL 33777		
		City/ State and Zip Coc	le
	mbesthospitality@yahoo.con	1	
	E-mail address: (to be us	sed for future annual repor	t notification)
For further informati	on concerning this matter, pleas	se call:	
Mukund D Patel		at () 230-2244 ode & Daytime Telephone Number
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check	or the following amount made	payable to the Florida Dep	partment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amen Division The C	Address dment Section on of Corporations Jentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

Maha Shakti Corporation	VI	er ç	ယ်	
	(Name of Corporation as currently filed with the Florida Dept. of State)		ů.	
	(Document Number of Corporation (if known)	, e' .	25	•

it(s) to

			بن
	(Document Number	of Corporation (if known)	77.
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation add	opts the following amendmen
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Corthartered," "professional association,"	Corp." "Inc," or "Co".	A professional corporation na	
B. Enter new principal office address,	if applicable:	9241 Silverthorn Rd	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		Largo, FL 33777	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		9241 Silverthorn Rd	
		Largo, FL 33777	
D. If amending the registered agent at new registered agent and/or the new	id/or registered office ad w registered office addre	dress in Florida, enter the nam	e of the
Name of New Registered Agent			
Name by New Registered Agent	9241 Silverthorn Rd		
	(Florida s	treet address)	
New Registered Office Address:	Largo	,	Florida_33777
		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ager	ıt·	
Thereby accept the appointment as regist			of the position.
	Signature of New	Registered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PTD	Mukund D Patel	9241 Silverthorn Rd
Add			Largo, FL 33777
Remove			
2) Change	VP	Devesh M Pael	9241 Silverthorn Rd
X Add			Largo, FL 33777
Remove 3) Change	S	Jipsy D Patel	9241 Silverthorn Rd Largo, FL 33777
Add Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change	-		
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary).	ticles, enter change (Be specific)				
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an amendment provides for an ex-	change, reclassifica	<u>ition, or cancellati</u>	on of issued shar	es,	
an amendment provides for an ex-	rendment if not co:	<u>itained in the ame</u>	<u>ndment itself:</u>		
rovisions for implementing the arr					
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	04/01/2021	
The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	lopted by the incorporators, or board of directors without shareholder act	tion and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendmen sufficient for approval.	t(s)
	oproved by the shareholders through voting groups. The following states or each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cas	of for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
04/27/202 Dated	1	
select	director, president or other officer – if directors or officers have not beer ed, by an incorporator – if in the hands of a receiver, trustee, or other connect fiduciary by that fiduciary)	
	Mukund D Patel	UISUAD BATE
	(Typed or printed name of person signing)	- 1/ -