P03000098158

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Shri Ganeshay Namah, Inc. DOCUMENT NUMBER: P03000098758 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mahesh Shah Name of Contact Person Shri Ganeshay Namah, Inc. Firm/ Company 1140 Motel Dr. Address Chipley, FL. 32428 City/ State and Zip Code mdshah@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (850) 960-8595

Area Code & Daytime Telephone Number Mahesh Shah Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

Shri ganeshay Namah, Inc.		
	filed with the Florida Deut, of State)	-
P03000098758		
(Document Number of	f Corporation (if known)	-
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the followin	g amendment(s) t
A. If amending name, enter the new name of the	corporation:	
N/A		The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Cor, word "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the a p," "Inc," or "Co". A professional corporation name must e abbreviation "P.A."	bbreviation
B. Enter new principal office address, if applicable	N / A	
(Principal office address MUST BE A STREET AD		
		-
		-
C. Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>)	-

D. If amending the registered agent and/or registe	ered office address in Florida, enter the name of the	14 JUH -9
new registered agent and/or the new registered	d office address:	
Name of New Registered Agent N/A		6
		myre "The
	(Florida street address)	بن برد د برد د برد الله
New Registered Office Address: N/A	Florida	* 1 P
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Re	gistered Agent	
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.	
N/A		
Signature of N	lew Registered 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.

X Change	PT Joh	n Doe	
<u>Х</u> Rеточе	<u>V Mik</u>	e Jones	
_X Add	SY Sall	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>P</u>	JITENDRA BHAKTA	5239 OAK DRIVE
Add			MARIANNA, FL.32446
Remove			
2) Change	S	MAHESH SHAH	504 PARKWOOD DR.
Add			PANAMA CITY,FL.32405
Remove			
3) Change	<u>D</u>	INDRAVADAN BANKER	4111 W. HWY.98
Add			PANAMA CITY, FL. 32401
Remove			
4) Change	PVPT	SAMPATRAI PATEL	1110 LOST LAKE RD.
Add			CHIPLEY, FL. 32428
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

	(Be specific)
A	
	
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
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provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

the date of each amendment(s) addate this document was signed.	opuon:	is other than the
Effective date if applicable:		
odettive date il applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	or the amendment(s) was/were sufficient for approval	
by N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoptaction was not required.	eted by the incorporators without shareholder action and shareholder	
Dated 6/5/2014		
Signature		
selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduction by that fiduction;	_
;	SAMPATRAI PATEL	
-	(Typed or printed name of person signing)	
1	PRESIDENT	
-	(Title of person signing)	