P04000018589

(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	÷#)
	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
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DIVISION OF CORPORALIDAS

Amund 05/05/12

COVER LETTER

Division of Corporations					
NAME OF CORPORATION: ANIL K TRUCKING INC					
DOCUMENT NUMBER: P 04 00 00 18 58 9					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
DHANRAJ KHEMRAJ Name of Contact Person					
ANIL K TRUCKING INC					
Firm/ Company					
2863 PAIGE DRIVE					
Address					
KISSIMMEE FL 34741					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
DHANRAJ KHEMRAJ at (407) 931 3558					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)					

Mailing Address

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ANIL K TRUCKING	INC
(Name of Corporation as currently filed with t	ne Florida Dept. of State)
P04000018589	
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	į.
	The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," word "chartered," "professional association," or the abbreviati B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	or "Co". A professional corporation name must contain the on "P.A." 12 MAY 2 SECRETARY 2
Name of New Registered Agent	
(Floria	la street address) 2 5
New Registered Office Address:	. Florida
rew negatives Office namess.	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent is family in the second	iar with and accept the obligations of the position.

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
l) Change Add Remove	,	SHAM KHEMRAJ	
2) Change Add Remove		MAHENDRANAUTH BALRAJ	NEW BRIGHTON MN 55112
3) Change Add Remove	<u></u>		
4) Change Add Remove	<u> </u>		
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Art (attach additional sheets, if necessary).	ticles, enter change(s) here: . (Be specific)
. <u></u>	
If an amendment provides for an exe provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	
	

The date of each amendment(s) adoption: 05 14 2012 Am May 14 2012
Effective date if applicable: May 14th 2012 (05) 14 2012 (no more than 90 days after amendment file date)
(no more than 90 days after amenament file date)
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 cast for the amendment(s) was/were sufficient for approval
by"
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.
Signature having khemray thoughter (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)
THANKAJ KHEMRAJ CHANDRAWRTIE (Typed or printed name of person signing) KHEMRAJ
(Title of person signing)