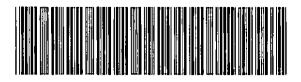
## 104000056036

(Requestor's Name)
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Aruna Internationa	l Inc.				
	1BER: P04000056036					
The enclosed Article	es of Amendment and fee are su	bmitted for filing.				
Please return all cor	respondence concerning this ma	tter to the following:				
	Roderick Roopnarine					
	Name of Contact Person					
	Firm/ Company					
	1870 N Corporate Lakes Blvd.					
Address						
	Weston, FL 33326					
		City/ State and Zip Code	е			
	Miabullettproof@yahoo.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, plea	se call:				
Roderick Roopnarin	e	at ( 516	939-3991			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Aruna International Inc.		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P04000056036		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	Iorida Profit Corporation adopts the fol	lowing amendment(s) to
A. If amending name, enter the new name of the corporation:		The new
name must be distinguishable and contain the word "corporation," "con". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A public "chartered," "professional association," or the abbreviation "P.A."		eviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA.	7626
D. If amending the registered agent and/or registered office address:	ss in Florida, enter the name of the	   <sub>                                  </sub>
Name of New Registered Agent   WM1		
New Registered Office Address:	t address)	
	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with a signature of New Reg	th and accept the obligations of the posi	ition.
Check if applicable		

 $\square$  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)

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 Do	o <u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>\$V</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	<u>T</u>	_	Saraswati A. Roopnarine	15167 135th Ave
X Add				Jamaica, NY 11434
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

If amending or add (Attach additional sh	ing additional Arteets, if necessary).	ticles, enter chang (Be specific)	e(s) here:		
NA		,			
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lf an amendment p	rovides for an exc	hange, reclassifica	ition, or cancellar	tion of issued share	PC .
If an amendment p	lementing the am	endment if not cor	tained in the am	endment itself:	<del></del>
NA	ole, indicate N/A)				
_N/H					
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			<del></del>		
	·				_
	<del></del>				

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	t(s) adoption:	, if other than the
date this document was signed Effective date if applicable:	August 5, 2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirement he Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareho	older action and shareholder
	re adopted by the shareholders. The number of votes cast for the americal sufficient for approval.	endment(s)
	re approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendmen	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
	st 5, 2020	
DatedSignature	Edwelet Recland Rooperin	
(E	by a director, president or other officer – if directors or officers have relected, by an incorporator – if in the hands of a receiver, trustee, or oppointed fiduciary by that fiduciary)	
	Roderick Roopnarine	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>