## P04000079909

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Amend

## TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: SAI CORPORATION OF CANTONMEN	VT,
DOCUMENT NUMBER: <u>P04000079909</u>	
The enclosed Articles of Amendment and fee are submitted for filing.	* · · · · · · · · · · · · · · · · · · ·
Please return all correspondence concerning this matter to the following:	
CARY E. EARLY, C.P.A. (Name of Person)	
$\cdot$	
CHARY E. EARLY, C.P.A., P.A. (Name of Firm/ Company)	
(Name of Firm/ Company)	
P.O. Box 336 (Address)	• .
(Address)	
CONTALET FC 32560 (City/ State/ and Zip Code)	
(City/ State/ and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, please call:	
CARY E. EARLY, C. P.A. at (850) 96 (Name of Person) (Area Code & Day)	8-2508
(Name of Person) (Area Code & Day	time Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status    \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines STallahassee, FL 32314Tallahassee, FL	ction porations treet

OLAUGIB AHIO: 01
TALLAHASSEE, FLORIDA

## Articles of Amendment to Articles of Incorporation of

(Name of corporation as currently filed with the Florida Dept. of State)  **POH ODO 1999  (Document number of corporation, if known) 1.4  resuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation opts the following amendment(s) to its articles of incorporation:  **BW CORPORATE NAME (if changing):**  nust contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  **MENDMENTS ADOPTED-** Indicate Article Number(s) and/or Article Title(s) being amended, led or deleted: (BE SPECIFIC)  **CTICLE Y-**  **LEMONE**  **ADD**  **MAMMALA SHANKER S/T KAMALAKAR LEDDY KATURALA GOVERN DR. ARTURALA SHANKER S/T KAMALAKAR LEDDY KATURA GOVERN DR. ARTURA SHANKER S/T KAMALAKAR LEDDY KATURA GOVERN DR. ARTURA SHANKER S/T KAMALAKAR LEDDY KATURA GOVERN DR. ARTURA GOVERN DR. AR		COLTORA TION OF			
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ADD*  CTICLE Y- **REMOVE*  CHUMMALA SHANKER 5/T KAMALAKAR REDDY KATUR  CON GOVERN DR. APT 1223  CENSACOLA FL 32514  PENSACOLA FL 32514  CECTOK-Secretary / TREASURER: D/KECTOR-SECRETARY / TREASURER  (Attach additional pages if necessary)  amendment provides for exchange, reclassification, or cancellation of issued shares, provisions	must contain the wor	1 "corporation," "company," or "incorporated" of	or the abbreviation "Corp	p.," "Inc.," or "Co.")	,
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mplementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)					
	mplementing the	amendment if not contained in the amen	dment itseif: (if not ap	oplicable, indicate N/A)	
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		(continued)		•*	

The date of each amendment(s) adoption: August 16, 2004
Effective date, if applicable: Aug 457 16 2004  (no plore than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were approved 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"
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.
Signed this 16th day of August 3004.
(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)
MOHAMMED S. ABBAS (Typed or printed name of person signing)
(Typed or printed name of person signing)
PAFSINENT
(Title of person signing)

FILING FEE: \$35