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(Ac	dress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	: #)
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SEP 0.7 2016

COVER LETTER

7.

TO: Amendment Section Division of Corporations

NAME OF CORPOR		JP USA INC	
DOCUMENT NUME	BER: P05000033064		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	S. MEHTA		
•	1	Name of Contact Person	1
	SCM & ASSOCIATES		
		Firm/ Company	· · ·
	P O BOX 2112		
		Address	
	RIVERVIEW, FL. 33568		
		City/ State and Zip Code	
SMA	RTBUSSOLU@GMAIL.COM	M	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
S. MEHTA		at (813	793-4571
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment 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)
Mai	ling Address	Street .	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Clifton Building			-
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FLED

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WELCOME GROUP USA INC

SECRETARY OF STATE
TALLAHAS TO CHECK DA

(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P05000033064	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation:	, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation SHREEJI ONE INC.	π: The new
	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
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)	P O BOX 2112
· · · · · · · · · · · · · · · · · · ·	RIVERVIEW, FL. 33568
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flori	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	
(i) (i) (ii)	Now Pagistared Agent if abanaing

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 <math>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 Do	<u>be</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
2) Change				
Add		_		
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add		_		
Remove				
5) Change				
Add		_		
Remove				
6) Change	-	_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

. 08/01/2016	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this dat document's effective date on the Department of State's records.	e will not be listed as the
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):	nt
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by," (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	r
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
08/12/2016 Dated	
Signature Kisher 2000ai	
(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)	t
appointed inductary by that inductary)	
Kishor Desai	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	