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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORP	ORATION:	MSK INC	
DOCUMENT NUMBER:		P06000103746	
The enclosed Artic	les of Amendment and fee a	re submitted for filing.	
Please return all co	rrespondence concerning thi	is matter to the following:	
-		PRITI PATEL lame of Contact Person	
•		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	11501 PLANT	ATION PRESSERVE CIRCLE Address	
-		T MYERS, FL 33966 ity/ State and Zip Code	
. 	AP SWAM E-mail address: (to be use	AI@HOTMAIL.COM d for future annual report notification)	. <u></u>
For further informa	tion concerning this matter,	please call:	
	TER T FLOOD		63-2177
Name	of Contact Person	Area Code & Daytime Tele	ephone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

of

,	MSK INC				
(Name of Corporation as c	urrently filed with	the Florida Der	ot. of State)		
P	06000103746	}			
*****	Number of Corpora		 		
Pursuant to the provisions of section 607. amendment(s) to its Articles of Incorporation		ites, this <i>Florida</i>	Profit Corporation	adopts the fol	lowing
A. If amending name, enter the new nam	e of the corporation	on:			
	N/A			The new	,
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered," "	the designation "C	Corp," "Inc," or	"Co". A profession		
B. Enter new principal office address, if a (Principal office address MUST BE A STR		N/A			
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF D. If amending the registered agent and/ new registered agent and/or the new re-	FICE BOX) or registered office		rida, enter the name	2011 JAN -6 AM 9: 15 SECRETARY OF SERVE HE MALL NASSEE, FLIREDAS	
Name of New Registered Agent:	PRITI PATEL	·			
New Registered Office Address:		TATION PRES	SSERVE CIRCLE		
	FORT MYER (City)		Florida 33 (Zip Code)	1966	
New Registered Agent's Signature, if cha I hereby accept the appointment as registere	nging Registered A	Agent: viliar with and ac	cept the obligations of	of the position.	
	Duti	1 -	i Patel		

in amonging 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>,</u> b	ARVIND PATEL	11501 PLANTATION PRESSER' FORT MYERS, FL 33966	VE□ Add □ Remove
P	PRITI PATEL	11501 PLANTATION PRESSER FORT MYERS. FL 33966	VI ☑ Add ☐ Remove
VP	RAJESH KUMAR PATEL	11501 PLANTATION PRESSER FORT MYERS, FL 33966	VI ☑ Add ☐ Remove
	ding or adding additional Articles, end dditional sheets, if necessary). (Be spe		
	nendment provides for an exchange, I		
	ons for implementing the amendment of applicable, indicate N/A)	if not contained in the amendment	usen.
N/A			

ı ne date ot each amendment(s) adoption: 🕡	HIVAMT 151. ZUII
	(date of adoption is required)
Effective date <u>if applicable</u> :	
(no more than	90 days after amendment file date)
Adoption of Amendment(s) (C)	HECK ONE)
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amendment(s) approval.
	the shareholders through voting groups. The following statemen g group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	ndment(s) was/were sufficient for approval
by	. "
by(voting group)	
action was not required.	e board of directors without shareholder action and shareholder e incorporators without shareholder action and shareholder
action was not required.	V MOO POLICIO I MANON CALLO I
Dated JAN 1ST, 2011	
Signature Puti	
	ident or other officer - if directors or officers have not been
selected, by an inco appointed fiduciary	rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)
прошес наста	oy that nationary)
	PRITI PATEL
(Ty	yped or printed name of person signing)
	PRESIDENT
(Title	of person signing)