P06000133885

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations	
NAME OF CORPORATION: Indus Group In	oc ,
DOCUMENT NUMBER: P06000133885	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Amith Grutha Name of Contact Person Indus Group I Firm/ Company	
Name of Contact Person	1
Indus Groun I	Mc.
Firm/ Company	
15 Warren St, Suite # Address Hackensack, NJ 0761 City/ State and Zip Code	31
Address	
Hackensack NJ D76	D.I
City/ State and Zip Code	e
E-mail address: (to be used for future annual report	notification)
5 (M. M. M	notification)
For further information concerning this matter, please call:	<u>ज</u>
Amith butho 201	notification) 15
Amith Grutha at 201 Name of Contact Person Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Depa	ortment of State:
S35 Filing Fee S43.75 Filing Fee Scrifficate of Status Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Address
Amendment Section Amend	lment Section

Division of Corporations

2661 Executive Center Circle Tailahassee, FL 32301

Clifton Building

Articles of Amendment

Articles of Incorporation

of

Indus Group	Inc.		
(Name of C	Corporation as currently t	filed with the Florida Dept. of State)	
P06000133 885	_		
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this <i>FI</i>	orida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name	e of the corporation:		
' 1	Indus Grp I	c. ""company," or "incorporated" or the abl	The new
name must be distinguishable and contain "Corp" "Inc.," or Co.," or the designati word "chartered," "professional associatio	on "Corp," "Inc," or "Ce	o". A professional corporation name must co A."	ontain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		15 Warren St, Su	ite #31
		Hackensack, NJ 07601	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF) D. If amending the registered agent and/e	FFICE BOX) or registered office addres	Same as above	- 11 1 1 1 5 PH 12: 09
new registered agent and/or the new r			91. 3.1.
Name of New Registered Agent	Amith Grutho		Sit
	4242 High L	wood Dr. Jacksonville, FL	32216
New Registered Office Address:		(Zip Co	
	(C	uy) (z.p C.	oae)
New Registered Agent's Signature, if char I hereby accept the appointment as registere		h and accept the obligations of the position.	
	a. Aunt	(ddg	
	Signature of New Reg	istered Agent, if changing	

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.

Mike Jones, V as Reme Example:	ove, and Sa	lly Smith, SV as an Add.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	Amith Gutha	15 Warren St, Suite #31
Add			Hackensack, NJ 07601
Remove			
2) Change		Aruna Masireddy	6520 W 110th St, swite # 205 Overland Park KS 66211
Add		v	Overland Park KS 66211
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)			
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f an amendment provides for an excl provisions for implementing the ame	nange, reciassificatio endment if not contai	<u>n, or cancenation o</u> ined in the amendm	<u>t issued snares,</u> ent itself:	
(if not applicable, indicate N/A)			· ·	
			-	

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)	
(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 date v document's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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" (voting group)	
(voting group)	
☐ 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.	
Dated 06/12/2019 Signature 6. Anix Rddy	
Signature le. Auit Rdy	
(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)	
Amith Gutha (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	