

P070000108903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

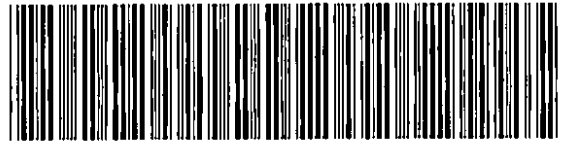
(Business Entity Name)

(Document Number)

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Amel

R. WHITE

OCT 2 - 2018

RECEIVED
DEPARTMENT OF STATE
18 SEP 28 PM 4:11 2018 OCT -1 AM 7:18
SECRETARY OF STATE
TALLAHASSEE, FL
FILED

PW



Frank P. Rainer
Senior Counsel
850.205.3312
Frank.Rainer@NelsonMullins.com

ATTORNEYS AND COUNSELORS AT LAW

215 S. Monroe St. | Suite 400
Tallahassee, FL 32301
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nelsonmullins.com

** In Florida, known as Nelson Mullins Broad and Cassel*

September 27, 2018

VIA HAND DELIVERY

State of Florida
Secretary of State
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Articles of Amendment to Articles of Incorporation of Shari Hari Kabir
Hospitality, Inc. – Document Number P07000108903

To Whom It May Concern:

Please find enclosed Articles of Amendment to Articles of Incorporation of Shari Hari Kabir Hospitality, Inc., a Florida corporation for filing with an effective date of September 28, 2018, together with our firm's check in the amount of \$52.50 as indicated on the cover letter.

In addition, we need to bring to your attention that unfortunately, our client erroneously mailed a Statement of Change of Registered Agent for this corporation, a copy of which is attached. We have been asked by the client to notify you to please withdraw and return what was mailed to you in error on 9/26/2018, together with the check.

If you have any questions, please contact me at 850.205.3338.

Sincerely,

A handwritten signature in black ink, appearing to be 'Frank P. Rainer', written over a horizontal line.

Frank P. Rainer
Senior Counsel

/kad
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SHRI HARI KABIR HOSPITALITY, INC.

DOCUMENT NUMBER: P07000108903

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANK P. RAINER

Name of Contact Person

c/o NELSON MULLINS BROAD AND CASSEL

Firm/ Company

215 S. MONROE STREET, SUITE 400

Address

TALLAHASSEE, FL 32301

City/ State and Zip Code

FRANK.RAINER@NELSONMULLINS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KATHY DILWORTH

at (850) 681-6810

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

2018 OCT -1 AM 7:12

SHRI HARI KABIR HOSPITALITY, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)
TALLAHASSEE, FL

P07000108903

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

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)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent RUPAL BHAKTA
435 N. TYNDALL PARKWAY
(Florida street address)

New Registered Office Address: PANAMA CITY, Florida 32404
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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.

Example:

X Change PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>NAREN BHAKTA</u>	<u>1001 SUMMERBROOKE DRIVE</u>
<input type="checkbox"/> Add			<u>TALLAHASSEE, FL 32312</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>PARESH GOCOL</u>	<u>5238 WOODGATE WAY</u>
<input type="checkbox"/> Add			<u>MARIANNA, FL 32446</u>
<input checked="" type="checkbox"/> Remove			
3) <input checked="" type="checkbox"/> Change	<u>P/D</u>	<u>RUPAL BHAKTA</u>	<u>435 N. TYNDALL PARKWAY</u>
<input type="checkbox"/> Add			<u>PANAMA CITY, FL 32404</u>
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>D</u>	<u>SWATI GOCOL</u>	<u>5238 WOODGATE WAY</u>
<input checked="" type="checkbox"/> Add			<u>MARIANNA, FL 32446</u>
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

(if not applicable, indicate N/A)

SEPTEMBER 28, 2018

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

SEPTEMBER 28, 2018

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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

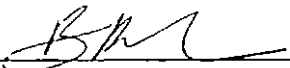
- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____
(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 9-28-2018

Signature 
(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)

RUPAL BHAKTA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)