## PD800008/447

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Amendia

## COVER LETTER

**Division of Corporations** NAME OF CORPORATION: Avi of Lakeland Inc DOCUMENT NUMBER: P080000081467 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Akshay Dave Name of Contact Person A+ Accounting & Tax Firm/ Company 328 S. Falkenburg Rd Address Tampa FL 33547 City/ State and Zip Code adave@tampabay.rr.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:  $at \, ( \underbrace{813}_{\text{Area Code & Daytime Telephone Number}} \underline{381\text{-}3809}$ Akshay Dave Name of Contact Person

Enclosed is a check for the following amount made payable to the Florida Department of State:

□\$43.75 Filing Fee &

Certificate of Status

Mailing Address

**\$35** Filing Fee

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

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

□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

## Articles of Amendment to Articles of Incorporation of

Avi of Lakeland Inc		
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	
P080000081467		
(Document Number of Corporation (if I	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Faits Articles of Incorporation:	Ilorida Profit Corporation adopts the following a	mendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbr o". A professional corporation name must con	he new reviation ntain 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)		<u>g</u>
D. If amending the registered agent and/or registered office address:  Name of New Registered Agent	ess in Florida, enter the name of the	ECRETARY OF STATES
Name of New Negwerea Agent	<del></del>	9 讀
(Florida stree	et address)	2 3
New Registered Office Address:	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	ith 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add	P	Jaipaben Patel	2038 Windward Pass Lakeland, FL 33813
× Remove			
2) Change Add Remove	Р	Ketang Patel	2038 Windward Pess Lakeland, FL 33813
3 ) Change Add Remove		_	
4) Change Add Remove	<del></del>		
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Articularies (additional Articularies). It additional sheets, if necessary).	(Be specific)
<del></del>	
<del></del>	
an amendment provides for an exchaptory	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendmen	t(s) adoption: D/1/2U12
Effective date <u>if applicable</u> :	6/1/2012
<u> мрричили</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
<sub>Dated</sub> 6/1	/2012
Signature _	( fini
(E	By a director, president or other officer - if directors or officers have not been
Se	elected, by an incorporator – if in the hands of a receiver, trustee, or other court
a	ppointed fiduciary by that fiduciary)
	Ketan Patel, President
	(Typed or printed name of person signing)
	Paesident
	(Title of person signing)