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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	············
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Amend



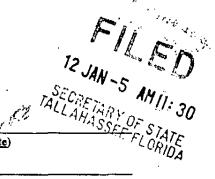
11.10

COVER LETTER

TO: Amendment Sect Division of Corp		•	•
NAME OF CORPO	RATION: VAISHNOE	DEVI INC.	
DOCUMENT NUMI	BER: P1000004206	2	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	•
Please return all corre	spondence concerning this mat	tter to the following:	
	PALAK K. PATEL		
		Name of Contact Person	· · ·
	VAISHNODEVI II		
		Firm/ Company	
	768 LAKEVIEW F	POINTE DR.	· .
		Address	
	CLERMONT, FL	34711	
		City/ State and Zip Cod	2
DH	RUV@JNSASSO	CIATE.COM	
·		ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
PALAK K. PA	ATEL	at (904	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made ;	payable to the Florida Depa	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy
	enclosed)	(Additional C	opy is enclosed)
	•		•
	ling Address endment Section	Street Amend	Address ment Section
	sion of Corporations		n of Corporations
	Box 6327		Building
	ahassee, FL 32314		xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



(tipute of corporation as curr	ently filed with the Flori	da Dept. of State)	ALLAHASSEE	FLOGIE
				ACITA
(Document Nur	mber of Corporation (if kn	own)		
suant to the provisions of section 607.1006, Articles of Incorporation:	, Florida Statutes, this Flo	rida Profit Corporati	on adopts the following	g amendmer
If amending name, enter the new name o	f the corporation:	,		
	·			The new
orp.," "Inc.," or Co.," or the designation of "chartered," "professional association," Enter new principal office address, if applicipal office address MUST BE A STREE	or the abbreviation "P.A plicable:			
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)	<u>u</u> I <u>CE BOX</u>)	· · · · · · · · · · · · · · · · · · ·	2	
To any address the consistence of a constraint and form	warintawal affice adduser	in Florido enter the	- mama of the	,
If amending the registered agent and/or new registered agent and/or the new reg	registered brice address:	m riorida, enter int	: name of the	
Name of New Registered Agent				
		·		
	(Florida street d	nddress)		
	(
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	, Flo		
New Registered Office Address:	(City)	, Flo	rida(Zip Code)	
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	, Flo		
	(City)	, Flo		
New Registered Office Address: We Registered Agent's Signature, if changereby accept the appointment as registered described.	(City) Ing Registered Agent:		(Zip Code)	

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> Jol	hn Doe	
X Remove	Y Mi	ike Jones	
_X Add	SV Sa	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change Add Remove	<u>c</u>	PALAK K PATEL	11310 S. ORANGE BLOSS TRU ORLANDO, FL 32837
2) Change Add Remove	Р	DILIPKUMAR PATEL	768 LAKE VIEW POINTE DR CLERMONT, FL 34711
3) X Change Add Remove	<u>VP</u>	KALPESHKUMAR C PATEL	11310 S. ORANGE BLOSS TRU ORLANDO, FL 32837
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Artutach additional sheets, if necessary).	(Be specifi	;)	•		
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an amendment provides for an exc	hanga realos	ification or	oonoellation of ic	and shows	
provisions for implementing the am	endment if no	t contained in	the amendment	itself:	
(if not applicable, indicate N/A)	•				
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
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		·			

The date of each amendment(s) a	doption: X	Nov	rember	17	2011
Effective date <u>if applicable</u> :		(no more the	ın 90 days after an	nendment fi	le date)
Adoption of Amendment(s)	(СНІ	ECK ONE)			
The amendment(s) was/were add by the shareholders was/were su			The number of vot	tes cast for t	he amendment(s)
The amendment(s) was/were app must be separately provided for					
"The number of votes cast	for the amend	dment(s) was/	were sufficient for	approval	
by	(voti	ng group)			
☐ The amendment(s) was/were add action was not required.	opted by the b	oard of direc	tors without shareh	older action	n and shareholder
The amendment(s) was/were add action was not required.	opted by the in	ncorporators	without shareholde	r action and	l shareholder
Dated DECE	MBER 2	27, 2011			
Dated DECE	Palak	Robert		_	
(By a c	lirector, presid	dent or other or rporator — if it	officer — if director in the hands of a rec		
	PALAK	K. PAT	EL		
	(7	Typed or prin	ted name of person	signing)	
	PRESI	DENT		:	
		(Title of ne	rson signing)		