P11000011597

(Requestor's Name)
(Address)
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(Business Entity Name)
(Business Entry Name)
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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	PRASHANTI			
	Name of C	Corporation		
DOCUMENT NUMBI	ER:P11	000011597		
The enclosed Statement	of Change of Registered Offic	e/Agent and fee are submitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
ARUN PATEL				
	Name of Co	ntact Person		
PRASHANI SAI INC				
Firm/Company				
		LTON CT		
	Add	ress		
	00141100	FI 20005		
ORLANDO, FL. 32835 City/State and Zip Code				
E-mail address: (to be used for future annual report notification)				
		,		
For further information	concerning this matter, please	call:		
	CUN PATEL FContact Person	at (407) 401 9014 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 ch	eck made payable to the Depar	tment of State.		
	Mailing Address: Amendment Section	Street Address: Amendment Section		
	Division of Corporations	Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ne provisions of sections 607.0502, 617.0502, 607.1508, or 61 hange is submitted for a corporation organized under the law der to change its registered office or registered agent, or both	s of the State of FLORIDA	·
1. The name of	of the corporation: PRASHANTI SAI INC		
2. The principal	al office address: 6302 DAYSBROOK DR UNIT 106		
ORLAND	OO, FL. 32835.		
3. The mailing a	g address (if different):		
4. Date of incor	orporation/qualification: 2011 Document n	umber: P11000011597	7
	nd street address of the current registered agent and registered artment of State: (If resigned, enter resigned)	d office on file with the	
	ARUN PATEL - 8501 FULTON CT, ORLANDO), FL. 32835.	
		est for	
			<u></u>
6. The name and (if changed):	nd street address of the new registered agent (if changed) and	/or registered office	幣0~5
	ARUN PATEL - 6302 DAYSBROOK DR UNIT	106	
	ORLANDO, FL. 32835. P.O. Box NOT acceptable		
	P.O. Box NOT acceptable		
The street addr	lress of its registered office and the street address of the bus	siness office of its registered ager	nt,
Such change wathorized by	was authorized by resolution duly adopted by its board of d the board, or the corporation has been notified in writing of	lirectors or by an officer so f the change.	
Signatu	ARUN The properties or director ARUN Printe	PATEL - PRESIDENT d or typed name and title	-
I hereby accept I further agree of my duties, an document is be corporation ha	pt the appointment as registered agent and agree to act in te to comply with the provisions of all statutes relative to the and I am familiar with and accept the obligation of my posieing film merely to reflect a change in the registered office as been notified in writing of this change.	this capacity. e proper and complete performan ition as registered agent. Or, if the e address, I hereby confirm that th	ıce his he
Sig	igranic of Registered Agent	11/15/2011 Date	-
If signing on be	behalf of an entity:		
	ARUN PATEL Typed or Printed Name		
·	* * * EH INC FFF. \$25.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)