P11000080586

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11 OCT -5 AN 9: 22 SECKETARY OF STATE

COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: SAI SCRIPTS INC.	
DOCUMENT NUMBER: P11000080586	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
OSWALD CORNELIO Name of Contact Person	
Name of Contact Person	
SAI SCRIPTS INC.	
1506 STERNS DR.	
Address	
LEESBURG FL 34748	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Oswald Cornelio at (352) 8743941	
Name of Contact Person at (33 &) & 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee Certificate of Status S43.75 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	
Amendment Section Amendment Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of	11 OCT - 5
SAI SCRITS INC.	SECRETARY AH 9: 22
(Name of Corporation as currently filed with the Florida Dept.	of State) MASSEE E. STATE
P11000080586	
(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:

		The no
name must be distinguishable and conta abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered,"	the designation "Corp," "Inc	," or "Co". A professional corporation
B. Enter new principal office address, if Principal office address <u>MUST BE A STR</u>		
C. Enter new mailing address, if applica (Mailing address <u>MAY BE A POST OF</u> D. If amending the registered agent and/	FFICE BOX)	a Florida, enter the name of the
new registered agent and/or the new r	egistered office address.	
new registered agent and/or the new r	(Florida street a	ddress)
new registered agent and/or the new r	(Florida street a	, Florida
new registered agent and/or the new r		

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
T	NALLAVOLU, KALPANA	1268 ALAPAHA LN ORLANDO FL32828	Add Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	ding or adding additional Articles, enter canditional sheets, if necessary). (Be specific		
provisi	mendment provides for an exchange, reclations for implementing the amendment if no not applicable, indicate N/A)		

The date of each amendment(s) adoption: 9/15/2011
(date of adoption is required)
The date of each amendment(s) adoption: (date of adoption is required) Effective date if applicable: (no more than 90 days after amendment file date)
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)
(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 10/3/2011 Signature
Signature
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
OSWALD CORNELLO
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)