P1200030600

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ldress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



200435226612

99/05/24--01006--019 **105.00

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CO | RPORATION: SANVY SYSTEM | MS INC. | | | |
|--|---|--|---|--|--|
| DOCUMENT | D10000000000 | | | | |
| The enclosed A | rticles of Amendment and fee are s | submitted for filing. | | | |
| Please return all | correspondence concerning this m | atter to the following: | | | |
| | Mounika Pachamatla | | | | |
| | | Name of Contact Person | 1 | | |
| | Sanvy. | | - | | |
| | Firm/ Company | | | | |
| | 51 S Main Ave - Ste. 309 | | | | |
| Address | | | | | |
| | Clearwater, FL 33765 | | | | |
| | | City/ State and Zip Cod | e | | |
| | hi@sanvysys.com | | | | |
| | E-mail address: (to be t | ised for future annual report | notification) | | |
| For further infor Mounika Pachar | mation concerning this matter, plea | | | | |
| | | at (<u> </u> | <u> 465-0651</u> | | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a ch | eck for the following amount made | payable to the Florida Depa | artment of State: | | |
| ■ \$35 Filing F | Cee □\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 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 | | Amend Divisio The Co | Address thent Section the of Corporations entre of Tallahassee V. Monroe Street, Suite \$10 | | |

Tallahassee, FL 32303

. Articles of Amendment to Articles of Incorporation

| | | corporation | | | |
|---|--|---|------------------------------|---------------------------------|----------------------|
| SANVY SSTEMS INC | of | | | | |
| (Name | of Corporation as assessed | | | | |
| P12000030600 | or corporation as current | lv filed with the Florida Dep | t. of State) | | |
| | (Document Number of | of Corporation (if known) | | | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | | | dopts the follo | owing ame | ndmen:(|
| A. If amending name, enter the new r | name of the corporation: | | | | |
| N/A | | | | | |
| name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association, | n the word "corporation." " Corp," "Inc," or "Co" " or the abbreviation "P.A." | company," or "incorporated" i professional corporation n | or the abbrev ame must co | The viation "Co ntain the | new np ," word |
| B. Enter new principal office address. | if applicable: | N/A | | | |
| (Principal office address MUST BE A.S | STREET ADDRESS) | | | | |
| | | | | -دن ورد | ~ 20 |
| | | | | | 24 |
| C. Enter new mailing address, if appl | licable: | | ļ | 22.78 | -SE |
| (Mailing address MAY BE A POST | OFFICE BOX) | | } . | 7- 1- | ٦- |
| | | | <u> </u> | 92.5 | ;\r |
| | | | | _=-=- | |
| | | | | <u></u> | = |
| D. If amending the registered agent an new registered agent and/or the new | nd/or registered office add | rest in Florida antautha | | 0.7 | |
| new registered agent and/or the ne | w registered office address | : | ne of the | 골ニ | = |
| Name of New Registered Agent | Ospey Law Firm | | ٠. | - , , , | 45- |
| | 9500 Koger Blvd. #112 | | | | |
| | (Florida str | est address) | | | |
| New Registered Office Address: | St. Petersburg, (City) | | 3370 | 12 | |
| | | | , Florida | Zıp Code) | |
| | | | | | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | hanging Registered Agent: tered agent. I am familiar v | : vith and accept the obligations | of the position | on. | |
| | | egistered Agent, if changing | | | |
| | Signature of New Re | egistered Agent, if changing | | | |

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

| X.Change | PT | John Doe | | |
|-------------------------------|------------|------------------------|--------------------|--|
| X Remove | <u>v</u> | Mike Jones | | |
| <u>X</u> Add | <u>\$V</u> | Sally Smith | | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | PS | Neise, Lakshminarayana | 5211 SW 133rd Ave | |
| Add | | | Miramar, FL 33027 | |
| X Remove | | | | |
| 2) Change | PS — | MOUNIKA PACHAMATLA | 7715 la haye drive | |
| X Add | | | Irving, TX 75063 | |
| Remove 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | <u> </u> | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |
| | | | | |

| | f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific) |
|-----|---|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| _ | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | · |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| . 1 | f an amendment provides for an exchange, reclassification, or cancellation of issued shares, |
| ! | |
| | (if not applicable, indicate N/A) |
| | , |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

| The date of each amendment(s) a date this document was signed. | doption:, if other than the |
|--|--|
| the document was signed. | |
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this bedocument's effective date on the De | lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators, or board of directors without shareholder action and shareholder |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval. |
| The amendment(s) was/were approved the separately provided for | proved by the shareholders through voting groups. The following statement 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) |
| Dated Aug 02 2 | 024 |
| Maurika & | 024 achamaila |
| selecte | rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) |
| | Mounika Pachamatla |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPO | ORATION: SANVY SYSTEM | IS INC. | | | | |
|--|---|--|--|--|--|--|
| DOCUMENT NUM | IBER: P12000030600 | | | | | |
| The enclosed Article | es of Amendment and fee are su | ibmitted for filing. | | | | |
| Please return all cor- | respondence concerning this ma | atter to the following: | | | | |
| | Mounika Pachamatla | | | | | |
| | Name of Contact Person Sanvy. | | | | | |
| | Firm/ Company | | | | | |
| | 51 S Main Ave - Ste. 309 | | | | | |
| | Address | | | | | |
| | Clearwater, FL 33765 | | | | | |
| | | City/ State and Zip Code | 2 | | | |
| | hr@sanvysys.com | | | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | | | |
| For further informat Mounika Pachamatl | ion concerning this matter, pleas | | | | | |
| | | at (224 | <u> 465-0651</u> | | | |
| Name | e of Contact Person | Area Coo | de & Daytime Telephone Number | | | |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: | | | |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 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 | | Amend Divisio The Ce 2415 N | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303 | | | |