P12000051516

(Re	questor's Name)	
(Add	dress)	·
(Add	dress)	
(City	y/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates of	f Status
Special Instructions to I	Filing Officer:	
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MAY 2 9 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NIRAPARA INC					
DOCUMENT NUMBER: P12000051516					
	of Amendment and fee are su				
Please return all corre	Please return all correspondence concerning this matter to the following:				
et	VIKAS SADASIV	AN			
		Name of Contact Persor	1		
	NIRAPARA INC				
		Firm/ Company			
	10805 NW 46TH	DR			
		Address			
	CORAL SPRING	S, FL 33076			
		City/ State and Zip Code	E		
VIŁ	(10190@GMAIL.C	COM			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information concerning this matter, please call:					
SUNIL KAYA	ALCHIRAYIL	_{at (} 561	371-6560		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee	★\$43.75 Filing Fce & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	iling Address		Address		
Amendment Section		Amendment Section			
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building			
Tallahassee, FL 32314 Chitton Building Call Executive Center Circle		_			
Tallahassee, FL 32314 Tallahassee, FL 32301					

Articles of Amendment to Articles of Incorporation of



NIRAPARA, INC

14 MAY 14 AM 10: 45

(Name of Corporation as currently filed with the F	lorida Dept. of State)
P12000051516	
(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or " word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	17085 PINES BLVD
Principal office address MUST BE A STREET ADDRESS)	PEMBROKE PINES, FL
	33025
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10805 NW 46TH DR
(170-171)	CORAL SPRINGS, FL
	33076
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	reet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	<u>t:</u>
I hereby accept the appointment as registered agent. I am familiar	with 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)	Title	Name	<u>Addres</u> s
1) Change	VP	VIKAS SADASIVAN	10805 NW 46TH DRIVE
Add			CORAL SPRINGS, FL
Remove			33076
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add	<u> </u>		
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti	
(Attach additional sheets, if necessary).	(Be specific)
-	
-	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	ted by the incorporators without shareholder action and shareholder	
Dated <u>05</u> -1	10-14	
Signature	- En law !	
selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
2	Suril Hayalchirayil (Typed or printed name of person signing)	<u>.</u>
_	President	
	(Title of person signing)	