P/3000034417

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COVER LETTER

TO: Amendment Section:

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: 1441 E FLETCHER INC DOCUMENT NUMBER: P13000034417 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAFIQ ALI HIRANI Name of Contact Person Firm/ Company 3905 TAMPA ROAD # 1707 Address OLDSMAR FL 34677 City/ State and Zip Code HARSHA.TAS@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAFIQ ALI HIRANI Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

1441 E FLETCHER INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P	1300003441	7			
(Document Numb	er of Corporation (if I	known)			
Pursuant to the provisions of section 607.1006, Fl its Articles of Incorporation:	lorida Statutes, this F	lorida Profit Corpora	tion adopts the fol	lowing amenda	nent(s) to
A. If amending name, enter the new name of the	he corporation:				
				The ne	!w
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "C	o". A professional c	ncorporated" or orporation name	the abbreviation the must contain to)n he
B. Enter new principal office address, if applic	cable:				
(Principal office address MUST BE A STREET					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)				
				<u> </u>	
D. If amonding the registered areat and/on res	nistand office addre	ss in Flouida, antou t	ha nama af tha	3 3	
D. If amending the registered agent and/or reg new registered agent and/or the new register		ss in Fjorida, enter ti	ne name of the	-	na ja
Name of New Projections of Asset				AN N	uratizu -
Name of New Registered Agent				2	E-MANUF
	(Florida stree	st addressa)			
	į rioriaa siree	a aaaress)		_	
New Registered Office Address:	(City)	, F	lorida(Zip Cod	59	* ****
	(Cily)		(Zip Coi	767.57	
		-	• •	•	
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as registered ago		th and accept the obli	gations of the pos	ition.	
Signature	of New Registered Ag	gent, 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)

Example:

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 <math>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 Chai	nge	<u>PT</u>	John Doe	
X Rem	ove	<u>v</u>	Mike Jones	
X Add	i	<u>sv</u>	Sally Smith	
Type of (Check	Action	<u>Title</u>	Name	Address
	Change	VP	AMEENA HIRANI	4793 BRAYTON TERRACE SOUTH
	_ Add			PALM HARBOR
X	_ Remove			FL 34685
2)	Change			<u> </u>
	_ Add			
	_ Remove			
3)	_ Change			_
	_ Add			
	_ Remove			
4)	Change			
	_ Add			<u></u>
	_ Remove			
5)	Change			_
	_ Add			·
	_ Remove			
6)	_Change		_	_
	_ Add			
	Remove			

(Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
or implementing the amen (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) a	doption: 04/22/2013
Effective date if applicable: 04	/22/2013
<u>in applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
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) afficient for approval.
	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)
	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
_{Dated} 04/22/	2013
Signature/	Ristani director, president or other officer – if directors or officers have not been
selecte	ed, by an incorporator – if in the hands of a receiver, trustee, or other court steed fiduciary by that fiduciary)
	RAFIQ ALI HIRANI
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)