## PH0000029567

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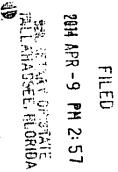
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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: M. Ramnauth Management Consulting Inc. DOCUMENT NUMBER: P14000029567 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Mala Ramnauth Name of Contact Person N/A Firm/ Company 533 Anchorage Drive Address North Palm Beach, FL 33408 City/ State and Zip Code mramnauth23@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Mala Ramnauth Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □ \$35 Filing Fee **□\$43.75** Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (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

FILED

м. Ramnauth Manageme	ent Consulting In	iC.	ZHR APR	-9 PM 2:	57
(Name of Corporation as of P14000029567	currently filed with the Fl	orida Dept.	of State)	BY OF MA	7 F
P14000029567			ŢĂĔĹ AĤĂĬ	SSEE FLOR	HÖA
(Document	Number of Corporation (if	(known)	(1)		
ursuant to the provisions of section 607.1 s Articles of Incorporation:	006, Florida Statutes, this I	Florida Profi	t Corporation adop	ots the following	ng amendm <b>e</b> n
. If amending name, enter the new nar	ne of the corporation:				
M. Ramnauth Inc.					The new
ame must be distinguishable and conta Corp.," "Inc.," or Co.," or the designa ord "chartered," "professional associati	tion "Corp," "Inc," or "(	Co". A profe			bbreviation
. Enter new principal office address, if	Fannlica blar	N/A			
Principal office address <u>MUST BE A ST</u>			······································		-
			····	<del></del>	_
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. Enter new mailing address, if applic	ahle.	N/A			
(Mailing address MAY BE A POST O		IN/A		,	_
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. If amending the registered agent and			a, enter the name	of the	
new registered agent and/or the new		Ĺ			
Name of New Registered Agent	N/A				
•	(Florida stre	eet address)			
New Registered Office Address:			, Florida		
	(City)			(Zip Code)	_
ew Registered Agent's Signature, if ch	anging Registered Agent:				
hereby accept the appointment as registe			ot the obligations o	of the position.	
Sign	nature of New Registered A	gent, if chans	zing		

## 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 <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.

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	Address
1) Change			
Add Remove			
2) Change			
Add			
Remove		N A	
3) Change	-		**************************************
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change	-/	·	***************************************
Add Remove			

Α		
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<u>If a</u>	n amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
If a	ovisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
pr	n amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
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date this document was signed.	adoption:	, if other than the
Effective date if applicable: N	/A	
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
<sub>by</sub> N/A	,,	
· · · · · · · · · · · · · · · · · · ·	(voting group)	
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 0	7 APR 2014	
Signature	Mala	_
selec	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Mala Ramnauth	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	<del>_</del>