P14000060662

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: 5815 L	DIXIE PLAZA INC						
DOCUMENT NUMBER: P14000060							
The enclosed Articles of Amendment a		filing.					
Please return all correspondence concer	ming this matter to the fo	llowing:					
Nirmal Sawhney	,						
	Name of	Contact Person					
	Firm	/ Company					
531 N. Ocean Bl	lvd #201						
	_	Address					
Pompano Beach,							
	City/ Stat	e and Zip Code					
billysahni@gma	il.com						
E-mail addr	ess: (to be used for future	annual report no	otification)				
For further information concerning this	matter, please call:						
Nirmal Sawhney	a	954 at (% Daytime Telephone Number				
Name of Contact Person	1	Area Code	& Daytime Telephone Number				
Enclosed is a check for the following as	mount made payable to th	ne Florida Depart	ment of State:				
■ \$35 Filing Fee □\$43.75 Fi Certificate	e of Status Certifie	d Copy nal copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231		Division The Cen 2415 N.	ent Section of Corporations tre of Tallahassee Monroe Street, Suite 810 see, FL 32303				

Articles of Amendment to Articles of Incorporation of

C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	01		
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 7881 CS PLAZA INC The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent	5815 DIXIE PLAZA INC		
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Name of New Registered Agent Name of New Registered Agent			
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Name of New Registered Agent Name of New Registered Agent			
ALL CONTRACTOR		ss in Florida, enter the name of	<u>the</u>
ALL ALL	Numa of Ninu Pagistavad Agant		_
(Florida street address)	Name of New Registered Agent		
(Florida street address)		; -	— i g
	(Florida stree	t address)	
New Registered Office Address: , Florida , Florida			ida 🧘 🙃
(City) (Zip Code)	(C	Σiφ)	(Zip Code)
Your Busintered Agent's Signature if changing Degistered Agent.	New Registered Agent's Signature, if changing Registered Agents		<u> </u>
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position:		th and accept the obligations of th	te position:
	- · · · · · · · · · · · · · · · · · · ·	- - -	-

Signature of New Registered 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)

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 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	<u>P1</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
l) Change			
Add			
Remove			
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
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6) Change			
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	ng or adding addi ditional sheets, if n	iecessary). (Be specific)				
						· · -	
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f an ame	ndment provides	for an exchan	ige, reclassific	ation, or can	cellation of is	sued shares,	
<u>provisio</u>	ns for implementi	ng the amend	ment if not co	<u>ntained in th</u>	<u>ie amendmen</u>	t itself:	
(if no	ot applicable, indic	:ate N/A)					
					<u>-</u>		
							
							

•

The date of each amendment(s date this document was signed.	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment	Gladan)
	(no more than 90 days after amenament	file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing rec Department of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors withou	ut shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	or the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the a	
"The number of votes c	ast for the amendment(s) was/were sufficient for approva	ı
by		•
	(voting group)	
elc	a director, president or other officer – it/directors or officeted, by an incorporator – if in the hands of a receiver, trointed fiduciary by that fiduciary)	
	Nirmal Sawhney	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	