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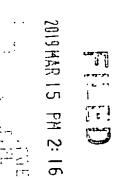
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R. WHITE KIND (CJ

' COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DHAKA PETROLIUM INE #101
DOCUMENT NUMBER: P14000076819
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SOWRAB BISWAS Name of Contact Person
Firm/ Company
3303 KENIL WORTH BOULEVARD
SEBRING F4. 33870 City/State and Zip Code
Shahanent @ Yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (813) 842 - 853 3

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fcc Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

to Antiples of Insu	ounception [The first Column
Articles of Inco	
HAKA PETROLÍ (Name of Corporation as currently) 1400 00 76819	um 1 Ne # 101
(Name of Corporation as currently	filed with the Florida Dept. for State) Fil Z: [b
14000076819	Corporation (if known) IALL 2015 3.1.E.FL
ant to the provisions of section 607.1006, Florida Statutes, this I ticles of Incorporation:	Florida Profit Corporation adopts the following amendment
·	·
DHAKA PETRLEU	om in 0 # /bi
must be distinguishable and contain the word "corporation	The new
p.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "C chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
	Same
nter new principal office address, if applicable: cipal office address <u>MUST BE A STREET ADDRESS</u>)	
	
	COME
	SAME
Enter new mailing address, if applicable: Mailing address <u>MAY BE A POST OFFICE BOX</u>)	SAME
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Mailing address MAY BE A POST OFFICE BOX) [smcnding the registered agent and/or registered office address: ew registered agent and/or the new registered office address:	ess in Florida, enter the name of the Som G
Mailing address MAY BE A POST OFFICE BOX) [amending the registered agent and/or registered office address: where we registered agent and/or the new registered office address: Name of New Registered Agent (Florida street) New Registered Office Address:	ess in Florida, enter the name of the

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

SAME

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	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove		•	
2) Change			
Add			
Remove			**************************************
3) Change			-
Add			·
Remove			
4) Change			
Add			
Remove		·	-
5) Change			
Add			
Remove			
6) Change			
Add			
Pemove			

If amending or adding additional Art (Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
-27 803	
	
If an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if nut contained in the amendment itself:
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The date of each amendment(s) addate this document was signed.	loption:			, if other than
Effective date if applicable:		15 14	MARCI	42819
	(no more ti	ran 90 days afte	r amendment file date)	
Note: If the date inserted in this b document's effective date on the De			ory filing requirements,	, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were ado by the shareholders was/were su		. The number of	Votes east for the amen	idment(s)
☐ The amendment(s) was/were app must be separately provided for				
"The number of votes cast	for the amendment(s) wa	s/were sufficien	t for approval	
by	(voting group)	· · · · · · · · · · · · · · · · · · ·	. 13	
	(voting group)			
The amendment(s) was/were ado action was not required.	pted by the board of dire	ectors without sh	areholder action and sh	rreholder
The amendment(s) was/were ado action was not required.	pted by the incorporators	s without sharch	older action and shareho	older
Dated	3-13-	-)3	•	
Signature S	aucat f	// /-		
(By a d	irector, president or other			
	d, by an incorporator – if led fiduciary by that fiduc		a receiver, trustee, or ot	ner court
	Sowra	b Bi	SWUS)
	(Typed or pri	nted hame of pe	rson signing)	
	res	IJON	<u>T</u>	
	(*	Title of person s	igning)	