## P140000085991

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JUN 2 5 2018 SEE FLORE
S. YOUNG FLORE

## **COVER LETTER**

TO: Amendment Section Division of Corporations

TALITY INC	_	
ubmitted for filing.		
atter to the following:		
Name of Contact Person	n	
Firm/ Company		
Address		
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904 at (	423-6860	
at ( 904 ) 423-6860  Area Code & Daytime Telephone Num		
payable to the Florida Depa	artment of State:	
□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Street Address Amendment Section Division of Corporations		
	Building Executive Center Circle	
	Name of Contact Person  Firm/ Company  Address  City/ State and Zip Cod  A seed for future annual report  ase call:  at (904  Area Co  payable to the Florida Depa  State Continual copy (Additional copy is enclosed)  Street  Amenc Divisic Clifton	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	of	•	
COSMOS HOSPITALITY INC			
( <u>Name</u>	of Corporation as currentl	y filed with the Florida	Dept. of State)
P14000085991			
	(Document Number of	f Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	,1006, Florida Statutes, this	Florida Profit Corporal	ion adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
NA			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	uation "Corp," "Inc," or "	Co". A professional co	corporated" or the abbreviation
B. Enter new principal office address,		NA	<u>.</u>
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )		ASS TO
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		NA	JUN 22 PH 3: 23  ANIASSEE, FLORID
D. If amending the registered agent at new registered agent and/or the ne	w registered office address		e name of the
Name of New Registered Agent	ARUN KAUSHAL		
	510 LANE AVES JACK	SONVILLE FL 32254	
	(Florida str	vet address)	
New Registered Office Address:	510 LANE AVES JACKSONVILLE (City)		, Florida
			(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	tered agent. I am familiar v	i with and accept the oblis Bull	ations of the position.
	Signature of New R	egistered Agent, if chan	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 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	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	DEV SHARMA	510 LANE AVE S
Add			JACKSONVILLE FL
X Remove			32254
2) Change	P	ARUN KAUSHAL	510 LANE AVE S
X Add			JACKSONVILLE FL
Remove			32254
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Ar (Attach additional sheets, if necessary)	(ucies, enter char ). (Be specific)	ige(s) nere:			
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If an amendment provides for an exc provisions for implementing the am	change, reclassific	cation, or cance	llation of issued a	shares,	
(if not applicable, indicate N/A)	<u> </u>	omanica in the	amendmem user)	<u>•</u>	
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The date of each amondments	01/01/2018	
The date of each amendment(s date this document was signed.	) adoption:	, if other than the
Effective date if applicable:	NA	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this d Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ienī
	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	adopted by the board of directors without shareholder action and sharehold	ler
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
01/01/20 Dated	DIS	
Daned		
Signature		
(By sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other coubinted fiduciary by that fiduciary)	
	DEV SHARMA	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	