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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Sampoorna Ayur	vedic College Inc.	
DOCUMENT NUMB	ER: P14000098105		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Anay Abreu		
-	<u> </u>	Name of Contact Person	1
	Sampooma Ayurvedic Col	lege Inc.	
-		Firm/ Company	
	7221 Bedlington Rd		
•		Address	
	Miami Lakes, Fl 33014		
-		City/ State and Zip Cod	e
anay(0625@yahoo.com		/
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Anay M Abreu		at (<u></u>	389-2408
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
	indment Section		Iment Section
	sion of Corporations	Division of Corporations Clifton Building	
	Box 6327 ahassee, FL 32314		Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Sampoorna Ayurvedic College, Inc.			
(Name)	of Corporation as currentl	y filed with the Florida Dept. of	State)
P14000098105			
	(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adop	ts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "	Co". A professional corporatio	ted" or the abbreviation
B. Enter new principal office address,	if applicable:	7221 Bedlington Rd	
(Principal office address MUST BE A S		Miami Lakes, FL 33014	
			G G
			三型 F TI
C. Enter new mailing address, if appt (Mailing address MAY BE A POST		7221 Bedlington Rd	短 23 王
(Muning data ess MAT DE AT VOT	OTT TEE BON	Miami Lakes, FL 33014	
		· · · · · · · · · · · · · · · · · · ·	
D. If amending the registered agent ar new registered agent and/or the ne			of the .
Name of New Registered Agent	Anay Abreu		
	7221 Bedlington Rd		
	(Florida sti	eet address)	
New Registered Office Address:	Miami Lakes	F	33014 Iorida
New Registered Office Address.	****	(City)	(Zip Code)
		•	·
New Registered Agent's Signature, if of I hereby accept the appointment as regis	hanging Registered Agent	in and accept the obligations of	f the position
Thereny accept the appointment as region	nered agent. I am jamana	Pice	m primon
		fr -	
	Signature of New	 Registered Agent, if changing	
	Signature by rich	The state of the 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)

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 Remove V Mike Jones X Add SV Sally Smith	
Type of Action Title Name Address (Check One)	
P Frances Yahia 5749 NW 151 St	
Add	
2) Change	
Remove	
Add	
4) Change	
Remove	
Add	
Remove	
Add	

	(Be specific)			
				
		<u> </u>		
		<u>-</u>		
				
				
				
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	 	. — — —		
			-1-1	
				
		11.6		
f an amendment provides for an excl	nange, reclassification	, or cancellation o	issued shares,	
provisions for implementing the ame	nange, reclassification ndment if not contain	or cancellation o	issued shares, ent itself:	
If an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification ndment if not contain	, or cancellation o ed in the amendm	issued shares, ent itself:	
provisions for implementing the ame	nange, reclassification ndment if not contain	, or cancellation o ed in the amendm	issued shares, ent itself:	
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provisions for implementing the ame	nange, reclassification ndment if not contain	or cancellation o	issued shares, ent itself:	

07-13-2018	
The date of each amendment(s) adoption:	, if other than th
date this document was signed.	
07-13-2018 Effective date if applicable:	
(no more than 90 days after	r amendment file date)
Note: If the date inserted in this block does not meet the applicable statute document's effective date on the Department of State's records.	ory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separa	
"The number of votes east for the amendment(s) was/were sufficient	• •
by	"
(voting group)	
 The amendment(s) was/were adopted by the board of directors without sha action was not required. The amendment(s) was/were adopted by the incorporators without shareho action was not required. 	
07-13-2018 Dated	
Signature (By a director, president or other officer – if director, pre	
Anay Abreu	
(Typed or printed name of per	rson signing)
President	
(Title of person si	gning)