

P15000009262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

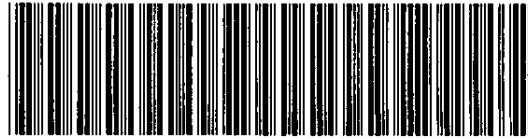
(Business Entity Name)

(Document Number)

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15 FEB 23 AM 10:59
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FEB 25 2015
C. CARROTHERS

Letter of Acknowledgment

Florida Department of State
Division of Corporations

CORPORATION - "DESI BOYZ INCORPORATED"

DOCUMENT NUMBER - P15000009262

ADDRESS - 708 DELAWARE AVENUE, FORT PIERCE, FL - 34950

SUBJECT: REMOVING AN OFFICER FROM OUR CORPORATION.

THIS IS AVI SAHA (VP) & KAJI G. HAKKANI (P), behalf of our Corporation called "DESI BOYZ INCORPORATED". We are the people, who are the owners of this Corp. While we were registering our new corp. on Sunbiz.org, we added one of our employee called "MUHAMMAD S. SAGHIR" as an officer (T). Who will work for us as an employee at our Convenience Store. But we didn't know that, if we add him on the corp. this will be considered as our partner or co-owner. Which is not going to happen. There's only two owners KAJI G. HAKKANI (P) & AVI SAHA (VP) are the President & Vice President of this Corporation. So, we are requesting you to fix our mistakes. So, please remove our OFFICER (T) "MUHAMMAD S. SAGHIR" from our "DESI BOYZ INCORPORATED" & keep us two (2) owners as President & Vice President "KAJI G. HAKKANI" & "AVI SAHA".

If you have any questions, please call us at 772-353-6383.
THANK YOU SO MUCH FOR YOUR HELP.

Kaji G. Hakkani

President, KAJI G. HAKKANI

Avi Saha

Vice President, AVI SAHA

M Saif Saif

Removal Officer (T), MUHAMMAD S. SAGHIR

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DESI BOYZ INCORPORATED.
DOCUMENT NUMBER: P15000009262

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KAJI G HAKKANI / AVI SAHA

Name of Contact Person
DESI BOYZ INCORPORATED.

Firm/ Company
708 DELAWARE AVENUE

Address
FORT PIERCE/ FLORIDA - 34950

City/ State and Zip Code
avi_saha2005@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAJI G HAKKANI / AVI SAHA at (772) 353-6383

Name of Contact Person Area Code & Daytime Telephone Number

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

- | | | | |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee 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

Articles of Amendment
to
Articles of Incorporation
of
DESI BOYZ INCORPORATED

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000009262

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

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."

N/A

B. Enter new principal office address, if applicable:

*(Principal office address **MUST BE A STREET ADDRESS**)*

N/A

N/A

C. Enter new mailing address, if applicable:

*(Mailing address **MAY BE A POST OFFICE BOX**)*

N/A

N/A

N/A

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 _____ N/A

(Florida street address)

New Registered Office Address: _____ N/A _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

Signature of New Registered Agent, if changing

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>MUHAMMAD S SAGHIR</u>	<u>204 S 30TH STREET</u> <u>FORT PIERCE</u> <u>FL-34947</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

We KAJI G HAKKANI (P) & AVI SAHA (VP) under "DESI BOYZ INCORPORATED"

want to remove one of our Officer from our corporation.

DOCUMENT NUMBER: P15000009262

Removal name is : MUHAMMAD S SAGHIR / Treasurer

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: N/A, if other than the date this document was signed.

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

“The number of votes cast for the amendment(s) was/were sufficient for approval
by _____.”
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 02/16/2015

Signature

Kaji / Avih

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

KAJI G HAKKANI / AVI SAHA

(Typed or printed name of person signing)

PRESIDENT / VICE PRESIDENT

(Title of person signing)