

P15000032665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500272591625

05/08/15--01007--022 **35.00

FILED
15 MAY - 8 AM 9:10
TALLAHASSEE, FLORIDA

And

MAY 11 2015

R. WHITE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 28, 2015

MADHU SUDAN REBBA
4270 VINEYARD CIR
WESTON, FL 33332

SUBJECT: SUPER GOOD FILMS, INC.
Ref. Number: P15000032665

We have received your document for SUPER GOOD FILMS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White
Regulatory Specialist II

Letter Number: 015A00008626

Articles of Amendment
to
Articles of Incorporation
of

SUPER GOOD FILMS, INC.

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

P15000032665

(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:

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 _____

(Florida street address)

New Registered Office Address: _____, 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

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

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Ganta Srinivasreddy</u>	<u>PT.59, 3-12-39/2</u> <u>Laxminagar, Mansoorabad,</u> <u>Ranga Reddy, 500068</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Arra Sunder Raj</u>	<u>21-26/2, F No- 201, 2nd Flr</u> <u>Sai Vijaya Residency, Daya</u> <u>Malkajgiri, Hyderabad,</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Chetty Chenna Keshava</u>	<u>H NO: 1-8-791/1</u> <u>Sairam Nagar, Nallakunta,</u> <u>Hyderabad, 500044</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Chetty Shiva Raghava</u>	<u>H NO: 3-4-47/1,</u> <u>Opp: Old Raghavendraswa</u> <u>Lingampally, Himayathnag</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Darelli Ashby Raju</u>	<u>Flat No G-4B-block parago</u> <u>Venkatadri APTS Barkathp</u> <u>Hyderabad, 500027</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Darelli Benci Raju</u>	<u>F No G-4B Paragon Venka</u> <u>Barkathpura,</u> <u>Hyderabad, 500027</u>

(1-6 REPEATED)

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Arra Sunder Raj</u>	21-26/2, F No- 201, 2 nd Floor, Sai Vijaya Residency, Dayananda Nagar, Malkajiri, Hyderabad, AP.
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Chetty Chenna Keshava</u>	H NO: 1-8-791/1, Sairam Nagar, Nallakunta, Hyderabad- 500044, AP
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Chetty Shiva Raghava</u>	H NO: 3-4-47/1, Opp: Old Raghavendraswamy Temple, Lingampally, Himayathnagar, Hyderabad-500027, Telangana, India.
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Darelli Ashby Raju</u>	Flat No G-4B-block paragon Venkatadri APTS Barkathpura Hyderabad-500027, AP
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Darelli Benci Raju</u>	F No G-4B Paragon Venkatadri APTS Barkathpura, Hyderabad-500027, AP, INDIA.
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Ganta Srinivasreddy</u>	PT.59, 3-12-39/2 Laxminagar, Mansoorabad, L B Nagar, Ranga Reddy-500068, AP

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
7) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Kasala Sainath Goud</u>	H No: 1-395/1, Musheerabad, Hyderabad, AP
8) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Keshapaga Bharat Raju</u>	H No: 1-7-922, Ram Nagar, Musheerabad, Hyderabad, 500020 Andhra Pradesh, INDIA.
9) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Mohammed Aijaz Ali</u>	H No: 17-8-462/D/11, Bagh E Jahanara, Yakutpura Hyderabad- AP.
10) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Mohammed Thazeer</u>	H.No. 4-59, (Vill) Amangal, (Mandal) Vemulapally, (Dist) Nalgonda, Andhra Pradesh,
11) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Medidi Naveen Prasad</u>	D.NO. 1-34, Gadhivari Thota, Rustumbada (P), Narsapuram (MDL), West Godavari (DIST)-534275, AP
12) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Narra Raju</u>	H NO: 2-57/A, Mahitapur, Raikal, Karimnagar, 505460 Andhra Pradesh, INDIA.
13) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Pirani Amiya Abdul Aziz</u>	H NO: 5-8-494/211, D-Class, 3 FLR, Karimabad Colony, Chiragali Lane, Hyderabad-500001, AP

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
14) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Rangu Shekhar</u>	H NO: 1-6-142/1, Vanjariwada, Jagtial Post Mandal, Karimnagar, 505327 Andhra Pradesh, INDIA.
15) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Talasani Srikanth Reddy</u>	H.NO: 9-9-21/1/A, 1st Floor, Reddy Colony, Champapet, Hyderabad-500059 Andhra Pradesh, INDIA.

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

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)

The date of each amendment(s) adoption: _____, 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

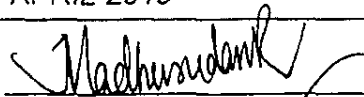
by _____."
(voting group)

☒ 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 15-APRIL-2015

Signature



(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)

MADHU SUDAN REBBA

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)