

P15000055650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

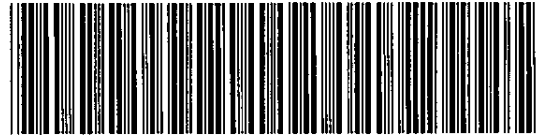
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUL 27 PM 12:03

JUL 28 2015

T CANNON



Attn: Tina Cannon.

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 23, 2015

DOMINIC JOHN
DJ & J ASSOCIATES
2400 SE 36TH AVENUE
OCALA, FL 34471 US

SUBJECT: SHREE UMIYAMAA 2 INC
Ref. Number: P15000055650

We have received your document for SHREE UMIYAMAA 2 INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please choose ONE of the TWO street addresses listed on the articles of amendment for the registered agent.

YOU MAY ONLY LIST ONE ADDRESS FOR THE REGISTERED AGENT.

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.

Tina D Cannon
Regulatory Specialist II

Letter Number: 015A00015469

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 14, 2015

DOMINIC JOHN
DJ & J ASSOCIATES
2400 SE 36TH AVE
OCALA, FL 34471 US

SUBJECT: SHREE UMIYAMAA 2 INC
Ref. Number: P15000055650

We have received your document for SHREE UMIYAMAA 2 INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please choose one of the two street addresses listed on the articles of amendment for the registered agent.

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.

Tina D Cannon
Regulatory Specialist II

Letter Number: 815A00014736

RECEIVED
15 JUL 22 AM 10:20
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SHREE UMIYAMA 2 INC

DOCUMENT NUMBER: P 15 0000 35650

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

Please return all correspondence concerning this matter to the following:

DOMINIC JOHN
Name of Contact Person

DJ & J ASSOCIATES
Firm/ Company

2400 SE 36th Ave
Address

Ocala FL 34471
City/ State and Zip Code

dj-urnad@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dominic John at (352) 785 0906
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:

☒ \$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)

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SHREE UMIYAMAA 2 INC

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

27 PH 12:03

P15000055650

(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

SHARMISTHA V PATEL

5101 SW 60th ST RD, Ocala, FL 34474

(Florida street address)

New Registered Office Address:

5101 SW 60th ST RD, Ocala, Florida, 34474

(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.

Sharmista Patel

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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

P

Sonal Patel

1509 NE 46th Road

☐ Add

Ocala, FL 34470

☒ Remove

2) ☐ Change

P

Sharmistha V Patel

5101 SW 60th St Rd

☒ Add

Ocala, FL 34474

☐ Remove

3) ☐ Change

☐ Add

☐ Remove

4) ☐ Change

☐ Add

☐ Remove

5) ☐ Change

☐ Add

☐ Remove

6) ☐ Change

☐ Add

☐ Remove

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TALLAHASSEE, FLORIDA

15 JUL 27 PM 12:03

1. What is the main purpose of the document?

2. What are the key findings of the study?

3. What are the implications of the findings?

4. What are the limitations of the study?

5. What are the conclusions of the study?

6. What are the recommendations of the study?

7. What are the future research directions?

8. What are the acknowledgments?

9. What are the references?

10. What are the appendices?

7 Pt 12:03

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TALLAHASSEE, FLORIDA

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 07.02.2015

Signature Sonal Patel

(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)

Sonal Patel

(Typed or printed name of person signing)

President

(Title of person signing)

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TALLAHASSEE, FLORIDA