0150600 85197

(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:			
WIII wait \$43,75			

Office Use Only



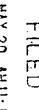
900314013849

05/30/18--01018--007 **87.50

S TALLENT MAY 3 0 2018

10 HAY 30 AM II: 36

friend



COVER LETTER

TO: Amendment Section

Division of Corporations

Fallahassee, FL 32314

NAME OF CORPORATION: Win Squeres Tre DOCUMENT NUMBER: P1500085197 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Syanthuyang A. Sadaga pal 2957 capital prox Drive, Ste 5 Address Tallahassee FL 32301
City/ State and Zip Code Syamilia yang O Winsquares . net
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Syarthiyan a Sadryapul at (850) 459-0785

Area Code & Daytime Telephone Number Enclosed is a cheek for the following amount made payable to the Florida Department of State: ☑\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, Fl. 32301

Articles of Amendment to Articles of Incorporation of

Winsquares, Inc.	
(Name of Corporation as current)	v filed with the Florida Dept. of State)
P1500085197 (Document Number o	
(Document Number o	l'Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	- 1
	2 S
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	= 0
	- ¹⁷⁸ , 61
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	ress in Florida, enter the name of the s:
Name of New Registered Agent	
(Florida si	reet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen 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, Saliy 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> <u>John</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CTO	Shaji Nair	16501 Formest Lake D- Tampa, FL-33624
<u>✓</u> Add			1ampa, FL-33624
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

<u>Shayi</u>	Nair	-> 49	i'/ OWN	ership c	of Winsqu	ares
						,,,, <u></u>
			 -			
						
					<u>-</u>	
						
						
						
rovisions fo	r implementing t	an exchange, recla he amendment if n	ssification, or can ot contained in th	cellation of issued te amendment itse	<u>i shares.</u> elf:	
(if not ap	plicable, indicate	N/4)				
						· · · · · · · · · · · · · · · · · · ·
						

	O513012018	
The date of each amendment(s) ad date this document was signed.	loption:	, if other than t
,	05/30/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dat	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(sfficient for approval.)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pited by the board of directors without shareholder action and shareholde	rr
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 05 3	2018	
Signature	Special for other officer- it directors or officers have not been	
selecte	lirected, president or other officed— if directors or officers have not been d, by an incorporator — if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	rt
	Syanthiyana A. Sadagoful (Typed or printed name of person signing)	www
	(Typed or printed name of person signing)	
	Chairman	
	(Title of person signing)	