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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: MEERA ENTERP	RISES INC			
DOCUMENT NUMI	DOCUMENT NUMBER: P16000071194				
The enclosed Articles	of Amendment and fee are sul	omitted for filing.			
Please return all corre	spondence concerning this mat	ter to the following:			
	DHRUV PATEL				
	1.8111	Name of Contact Person			
	PATEL & PATEL ACCOUNTING INC.				
		Firm/ Company	·		
	4223 SW. 33RD ST				
		Address			
	OCALA, FL 34474				
		City/ State and Zip Code	;		
- PAT	ELNPATEL@OUTLOOK.CO	M			
•	E-mail address: (to be us	ed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	e call:			
DHRUV PATEL		at (352	301-7989		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	rtment 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)		
Ma	iling Address	Street .	Address		
Amendment Section		Amendment Section			
Division of Corporations		Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

711. ED

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· .	of	<u> </u>	10 00, 4.	
mora En	iterarise	s Inc.	SECTION OF	Maria de California de Cal California de California de
(Name of Corpora	tion as currently fil	ed with the Florida	Dept. of State)	
(Docu	ument Number of Co	rporation (if known)		
Pursuant to the provisions of section 607.1006, Florids Articles of Incorporation:	da Statutes, this <i>Flo</i>	rida Profit Corporati	on adopts the follo	wing amendment(s)
a. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the wo 'Corp.," "Inc.," or Co.," or the designation "Cor word "chartered," "professional association," or th	rp," "Inc," or "Co"	A professional co		
3. Enter new principal office address, if applicab Principal office address <u>MUST BE A STREET AD</u>				
	-			
	_			
C. Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u>'OX</u>) _	· · · - · ·		
	_			
•				
D. If amending the registered agent and/or regist	ered office address	in Florida enter the	name of the	
new registered agent and/or the new registered		in Piorida, enter the	e name of the	
Name of New Registered Agent				
				
	(Florida street d	nddress)		
New Registered Office Address:			, Florida	
New Registered Office Address.	(Cit	יאי		Zip Code)
New Registered Agent's Signature, if changing Re		and account the oblice	atiana aftha nasiti	~
hereby accept the appointment as registered agent.	. i am jamiliar wiln	ана ассері іне овіів	ations of the positi	л.
Sig	gnature of New Regi	stered Agent, if chang	ging	<u>-</u>

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 Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	V	YASHVANTKUMAR D. PATEL	1855 NE 127TH PL
XAdd			ANTHONY, FL 32617
Remove			
2) Change			
Add			
Remove			
3) Change			 -
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	-	**************************************	
Add			
Remove			
6) Change			
Add			
Remove			

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

	01/01/2016	
The date of each amendment(s) date this document was signed.	adoption:,	, if other than the
	/01/2016	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will Department of State's records.	l not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
. 10/20/20 Dated	16	
Signature	ma atl	
(By a selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	MITALBEN PATEL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	