P16000073410

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COVER LETTER

Tallahassee, FL 32314

TO: Amendment Sec Division of Corp			
NAME OF CORPO	PRATION: SHREE HARI PSM	M INC	
	BER: P16000073420		
	s of Amendment and fee are su	bmitted for filing.	
	espondence concerning this ma		
	HELI CHAUDHARI		
	TIEBL CHARGONIA	Name of Contact Person	
		Firm/ Company	
	26773 FIDDLEWOOD LOO		
		Address	
	Wesley Chapel, FL 33544		
	4	City/ State and Zip Code	
	Wesley Chapel, FL 33544		
	E-mail address: (to be us	sed for future annual report notification)	
For further informati	on concerning this matter, pleas	se call:	. 3
HELI CHAUDHAR	ıl .	at (201) 7440107	
Name of Contact Person		Area Code & Daytime Telephone Number	<u>.</u> ,
Enclosed is a check t	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 & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	; (9
Ar Di	ailing Address mendment Section vision of Corporations O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P16000073420 (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

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

New Registered Office Address:

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

(Florida street address)

(City)

Check if applicable

SHREE HARLPSM INC

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

Example:

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
i) Change	<u>T</u>	DEEPKUMAR PATEL	52 PAXFORD LANE
X Add			BOYNTON BEACH
Remove			FL 33426
2) Change	S	PARITA GOHIL	7021 PENINSULA LAKE CT
X Add			LAKE WORTH, FL 33467
Remove 3) Change			
Add			
Remove			·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)	
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		<u> </u>
an amendment provides for an excl	unge, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
(y not appacame, maicale 1974)		
		- ·
		<u></u> 1
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The date of each amendment(s) ac	loption: 10/26/2023	, if other than th
late this document was signed.		
Iffective date if applicable:	(no more than 90 days after amendment file	
	(no more than 90 days after amenament file	aate)
Sote: If the date inserted in this be ocument's effective date on the De	lock does not meet the applicable statutory filing require partment of State's records.	ments, this date will not be listed as th
adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	pied by the incorporators, or board of directors without sh	archolder action and shareholder
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for th fficient for approval.	e amendment(s)
The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting groups. The following group entitled to vote separately on the amen	lowing statement dment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated_10/26/2023		
Signature	Rihrdub.	
selecte	irector, president or other officer – if directors or officers ld, by an incorporator – if in the hands of a receiver, trusted ted fiduciary by that fiduciary)	
	HELI CHAUDHARI	
	(Typed or printed name of person signing)	
	PRESIDENT	= = = = = = = = = = = = = = = = = = = =
	(Title of person signing)	
		ε