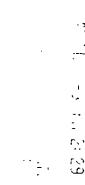


| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Somess Emily Hame) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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11/09/23--01030--005 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| NAME OF CORPO | DRATION: SHREE HARI PSM | M INC | | |
|-----------------------------------|---|---|--|--------|
| | IBER: P16000073420 | | | |
| The enclosed Article | s of Amendment and fee are su | bmitted for filing. | | |
| Please return all corr | espondence concerning this ma | tter to the following: | | |
| | HELI CHAUDHARI | | | |
| | | Name of Contact Perso | n | |
| | | Firm/ Company | | |
| | 26773 FIDDLEWOOD LOO | P | | |
| Address | | | | |
| Wesley Chapel, FL 33544 | | | | |
| | City/ State and Zip Code | | | |
| | Wesley Chapel, FL 33544 | | | |
| | E-mail address: (to be us | sed for future annual repor | t notification) | ارد تا |
| For further informati | ion concerning this matter, pleas | se call: | | 3.5 |
| HELI CHAUDHAR | 1 | at (201 | 7440107 | ځ. |
| Name of Contact Person | | at (201 7440107 Area Code & Daytime Telephone Number | | = |
| Enclosed is a check | for the following amount made | payable to the Florida Dep | partment 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) | , a |
| Mailing Address Amendment Section | | | t Address dment Section | |
| · · | vision of Corporations | | on of Corporations | |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

SHREE HARI PSM INC

(Name of Corporation as currently filed to

| (Name of Corporation as current) | y filed with the Florida Dept. of State) | |
|--|--|------------------------|
| P16000073420 | | |
| (Document Number o | f 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 "corporation," " "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A." | A professional corporation name must contain | n "Corp.," the word |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: | | ري د د |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | ئ. |
| | | |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | | (°) |
| | <u></u> | - 4 E |
| Name of New Registered Agent | | |
| (II) (I) (II) | reet address) | |
| (rioriaa sii | reet aduress) | |
| New Registered Office Address: | (City), Florida, Florida | Code) |
| | | • |
| New Registered Agent's Signature, if changing Registered Agent | <u>u</u> | |
| I hereby accept the appointment as registered agent. I am familiar | with and accept the obligations of the position. | |
| | | |
| | | _ |
| Signature of New I | Registered Agent, if changing | |
| | | |

Check if applicable

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

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 | <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 | <u>T</u> | DEEPKUMAR PATEL | 52 PAXFORD LANE |
| X Add | | | BOYNTON BEACH |
| Remove | | | F1. 33426 |
| 2) Change | <u>s</u> | PARITA GOHIL | 7021 PENINSULA LAKE CT |
| <u>X</u> Add | | | LAKE WORTH, FL 33467 |
| Remove 3) Change | | | · · · · · · · · · · · · · · · · · · · |
| Add | | | |
| Remove | | | |
| 4) Change | | | 1.7 |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| tach additional sheets, if necessary). | (Be specific) | | | |
|--|-------------------------|---------------------|-----------------------|---------------------------------------|
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| an amendment provides for an exc | change reclassification | on, or cancellation | of issued shares. | |
| rovisions for implementing the am | endment if not conta | sined in the amend | nent itself: | |
| (if not applicable, indicate N/A) | | | | |
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| The date of each amendment(s) ad | option: 10/26/2023 | , if other than the |
|---|---|------------------------|
| date this document was signed. | | |
| Effective date <u>if applicable</u> : | | |
| - | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bl document's effective date on the De | ock does not meet the applicable statutory filing requirements, this date will partment of State's records. | ll not be listed as th |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were adoraction was not required. | oted by the incorporators, or board of directors without shareholder action and | i shareholder |
| The amendment(s) was/were ado by the shareholders was/were sur | oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval. | |
| ☐ The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): | |
| | for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| | | ب . : |
| Dated 10/26/2023 | | د. سب |
| Signature | Hheudhari | |
| (By a di | rector, president or other officer - if directors or officers have not been | |
| | , by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) | , 2: |
| | HELI CHAUDHARI | 2 3 |
| | (Typed or printed name of person signing) | <u>17.</u> |
| | | |
| | PRESIDENT | |
| | (Title of person signing) | |