## P16000018584

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)	) .
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
Special Instructions to	Filing Officer:	





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SINISTER BAG TO HOISTONE

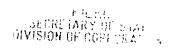
NOV - 4 2015 C LEWIS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Jalaram Manageme	nt Inc.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	Dilesh Patidar		
		Name of Contact Person	
	JALARAM MANAGEMENT	TINC	
		Firm/ Company	
	5575 N. ATLANTIC AVE		
		Address	
	COCOA BEACH, FL 32931		
		City/ State and Zip Code	
APRI	L@360HOSPITALITYGROU	JP.COM	
	E-mail address: (to be us	ed for future annual report r	notification)
For further information	n concerning this matter, pleas	e call:	
DILESH PATIDAR		at ( <sup>321</sup>	537-6382
Name o	of Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depar	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)
Ame Divi P.O.	cling Address endment Section dision of Corporations abox 6327 abox 6327	Division Clifton	Address  ment Section  n of Corporations  Building  recurive Center Circle

Tallahassee, FL 32301



## Articles of Amendment to Articles of Incorporation of

2016 NOV -3 PM 12: 18

( <u>Name</u>	of Corporation as currently	filed with the Florida Dept. of State)
P16000078584		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this F	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:	
N/A		The new
	nation "Corp," "Inc," or "C	""company," or "incorporated" or the abbreviation co". A professional corporation name must contain the P.A."
B. Enter new principal office address,	if annlicable:	SAME
(Principal office address MUST BE A S		
C. Enter new mailing address, if appl	icable:	SAME
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)	U. H. VIII
D. If amending the registered agent ar new registered agent and/or the ne		
	DILESH PATIDAR	
Name of New Registered Agent		
	5575 N ATLANTIC AVE	
	(Florida stre	,
New Registered Office Address:	COCOA BEACH	, Florida
	(	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Agent:	
		ith and accept the obligations of the position.
	7 /1 /2	
	Sign of two of Now P	existered 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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	DILESH PATIDAR	5575 N ATLANTIC AVE
X Add			COCOA BEACH, FL 32931
Remove			
2) Change	P	SAMIR PATEL	5575 N ATLANTIC AVE
Add			COCOA BEACH, FL 32931
X Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		<del>-</del>	· 
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
	-
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
(if not applicable, indicate N/A)	
, , , , , , , , , , , , , , , , , , , ,	
. <u> </u>	

11-2-16	FIGURE SCURETARY OF STATE OFFISION OF CORPORAL, SIGN
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	2016 NOV -3 PM 12: 18
11-2-16 Effective date <u>if applicable</u> :	,
(no more than 90 days of	after amendment file date)
Note: If the date inserted in this block does not meet the applicable stated document's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numbe by the shareholders was/were sufficient for approval.	r of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voice must be separately provided for each voting group entitled to vote separately provided.	
"The number of votes cast for the amendment(s) was/were suffic	ient for approval
by	,"
by	<del></del>
☐ The amendment(s) was/were adopted by the board of directors without action was not required.	t shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sha action was not required.	reholder action and shareholder
11-2-16	
Signature Signature	
(By a director, president or other officer - if	
selected, by an incorporator – if in the hands appointed fiduciary by that fiduciary)	of a receiver, trustee, or other court
Dilesh Patider	
(Typed or printed name of	f person signing)
Prejident	
	on signing)