P17000001125

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Amend

APR 0 6 2019
I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Sood Petroleum Inc	: 	***************************************	
DOCUMENT NUMBI	ER: P17000001125			
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corresp	ondence concerning this mat	ter to the following:		
		Deepak Sood		
_	Name of Contact Person			
	Sood Petroleum Inc			
_	Firm/ Company			
	1005 Lithia Pinecrest Rd			
-	Address			
		Brandon, FL 33511		
_		City/ State and Zip Code		
belltow	verinn@yahoo.com			
		ed for future annual report	notification)	
For further information Deepak Sood	concerning this matter, pleas	e call: at (479		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number	
	the following amount made	payable to the Florida Depa	ertment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amer Divis P.O.	ing Address Induction Induction of Corporations Box 6327 Induction of Corporations Box 6327	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Bassee, FL 32301	

Articles of Amendment Articles of Incorporation of

Sood Petroleum Inc

\	cently filed with the Florida Dept. of State) 000001125	
(Document Numbe	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, that Articles of Incorporation:		nt(s) to
A. If amending name, enter the new name of the corporation:	<u>ı:</u> The new	,
name must be distinguishable and contain the word "corpord "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	cation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the	!
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	27	11 CEU
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		
Name of New Registered Agent		
(Florida	da street address)	
New Registered Office Address:	(City) , Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	gent:	
Signature of No	lew 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, 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 Doc	
X Remove	\underline{V}	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	V	Himanshu Sud	1005 Lithia Pincerest Rd
X Add		-	Brandon, FL 33511
Remove			
2) X Change	P	Priyanka Sood	1005 Lithia Pinecrest Rd
, Add			Brandon, FL 33511
Remove			
3) Change			
Add			
Remove			
4) Change	•-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary). President - Priyanka Sood - 50%	es, enter change(s) here: (Be specific)
Vice President - Himanshu Sud - 40%	
Secretary - Anju Sood - 10%	
F. If an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A) N/A	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:

02/01/2019 , if other than the The date of each amendment(s) adoption: _ date this document was signed. 02/01/2019 Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) \square The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes east for the amendment(s) was/were sufficient for approval (voting group) ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) PRIYANKA L'OOD
(Typed or printed name of person signing) (Title of person signing)