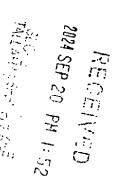
P180000 11920

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DATE: 09/20/2024 NAME: PEACE KARMA INC TYPE OF FILING: AMENDMENT COST: 35.00 RETURN: PLAIN COPY PLEASE ACCOUNT: FCA00000015 AUTHORIZATION: ABBIE/PAUL HODGE

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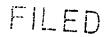
TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PEACE KARMA	INC				
DOCUMENT NUM	D19000011020					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	RAHUL ARORA					
		Name of Contact Person	1			
		Firm/ Company				
	7063 IVY CROSSING LANE					
	Address					
	BOYNTON BEACH, FL 334	·				
		City/ State and Zip Code	e			
	AHSBIZ@GMAIL.COM	·				
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call:				
RAHUL ARORA		at (_) 296-8837			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section In of Corporations In of Tallahassee I. Monroe Street, Suite 810			

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Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



PEACE KARMA INC	2024 SEP 20 AM II: LG
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P18000011920	JALLAHASSEELEI ORIO
(Document Number	per of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>u</u>
	The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc." or "Co" "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the word
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 MAY BE A POST OFFICE BOX)	
	
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	
	<u>1682</u>
Name of New Registered Agent	
(Florida	la street address)
	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	, Florida
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent. I am familia	tent: iar with and accept the obligations of the position.
Signature of New	w 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.

X Change	PT	John Do	<u>)C</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change	V		BHAVNA ARORA		7063 IVY CROSSING LANE
X Add		_			BOYNTON BEACH, FL 33436
Remove					
2) Change		_			
Add					
Remove 3) Change					
Add					
Remove					
4) Change		-			<u></u>
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5) Change		_ 			
Add					
Remove				İ	
6) Change		_			
Add					
Remove					

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an amendment provides for an a	exchange, reclassification, or cancellation of issued shapendment if not contained in the amendment itself:	ares,
rovisions for implementing the	amendment if not contained in the amendment itself:	ares.
an amendment provides for an erovisions for implementing the erovisions for implementing the erovisions applicable, indicate N/A	amendment if not contained in the amendment itself:	ares.
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rovisions for implementing the	amendment if not contained in the amendment itself:	aręs.

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The date of each amendment(s) ad date this document was signed.	option:	, if other that
Effective date <u>if applicable</u> :		
	(no more than 90 days after a	mendment file date)
Note: If the date inserted in this bl document's effective date on the De		y filing requirements, this date will not be listed a
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	ted by the incorporators, or board of direc	tors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sur	ted by the shareholders. The number of vicient for approval.	rotes cast for the amendment(s)
	oved by the shareholders through voting g ach voting group entitled to vote separate	
"The number of votes cast i	or the amendment(s) was/were sufficient for	or approval
by		
	(voting group)	TALLAHASS
SEPTEMB Dated	R 19, 2024	Profit To Bert To
Signature	wh Show	E.F.LOS
selected	ector, president or other officer – if director by an incorporator – if in the hands of a real if fiduciary by that fiduciary)	
1	AHUL ARORA	
-	(Typed or printed name of perso	on signing)
1	RESIDENT	
-	(Title of person signing)	

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