P1800019579

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SHREE DADAI	OF USA INC	
DOCUMENT NUMI	D10000070175		
The enclosed Articles	of Amendment and fee are s	ubmitted for filing.	
Please return all corres	spondence concerning this m	atter to the following:	
	HENRY PINTO		
		Name of Contact Pers	on
	PINTO ACCOUNTING		
•		Firm/ Company	
	228 WEST MAIN STREET		
•		Address	
	APOPKA, FL - 32703-5184		
		City/ State and Zip Co	de
DERE	BAIL@CS.COM		
	•	sed for future annual repor	t notification)
For further information HENRY PINTO	concerning this matter, pleas		
		at () 598-0134
Name of	Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. E	ng Address dment Section on of Corporations Box 6327 lassee, FL 32314	Ament Divisio Cliftor 2661 E	Address dment Section on of Corporations n Building Executive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2018 OCT - | PM 1: 09

SHREE DADAJLOF USA INC. (Name of Corporation as currently filed with the Florida Dept. of State) FLIAE I UF STATE P18000079579 (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 (Florida street address) New Registered Office Address: _, Florida_ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 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

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)

Flease 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> <u>J</u>	<u>Ohn Doe</u>	
X Remove	<u>v</u> <u>s</u>	dike Jones	
<u>X</u> Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PST	SHALESHKUMAR N. PATEL	4051 SW 49TH AVENUE
Add			OCALA. FL - 34474 US
Remove			
2) Change	VP	NAYTAMKUMAR B. PATEL	2442 SW 8TH PLACE
Add			NEWBERRY, FL - 32889 US
X Remove			
3) Change	VPT	VISHAL B. PATEL	4222 SE 9TH AVENUE
Add			OCALA, FL - 34480 US
N Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remov€			

	heets, if necessary).	(Be specific)			
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an amendment pr	rovides for an exch:	ange, reclassificat	ion, or cancellation	of issued shares,	
<u>provisions for impl</u>	lementing the amen	ange, reclassificat idment if not cont	ion, or cancellation ained in the amend	of issued shares, Iment itself:	
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<u>rovisions for impl</u>	lementing the amen	onge, reclassificat adment if not cont	ion, or cancellation ained in the amend	of issued shares,	

The date of each amendment date this document was signed		, if other than the
,	10/01/2018	
Effective date if applicable:	(no more than 90) days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this dhe Department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendment ere sufficient for approval.	(s)
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ient
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
p ì	(voting group)	
	(Touring group)	
■ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and sharehold	er
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
09/28 Dated	/2018	
Signature	y a director, president or other officer - if directors or officers have not been	
şe	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	SHALESHKUMAR N. PATEL	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(Title of person signing)	