# P18000089008

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: Mahati Inc		
DOCUMENT NUM	P18000080008		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Kiran Koushik		
		Name of Contact Person	
	Mahati Inc		
		Firm/ Company	
	19210. Pristine Pl	. ,	
		Address	
	Lutz, FL - 33558		
		City/ State and Zip Code	
		σ,. σ ε	
kiran ——	mr28@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Kiran Koushik		at ( 813	5081329
Name	of Contact Person		le & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	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)
Am Div P.O	iting Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amendi Division Clifton 2661 E:	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

MAHATTINC				
(Name)	of Corporation as currently	filed with the Florida Dept.	of State)	
P18000089008				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this J	Florida Profit Corporation ado	pts the following amen	dment(s
A. If amending name, enter the new na	ame of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	iation "Corp," "Inc," or "C	Co". A professional corporati	uted" or the abbrevia on name must contain	tion the
B. Enter new principal office address, (Principal office address MUST BE A S				_
(1	, , , , , , , , , , , , , , , , , , ,			_
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			2019 AUS 30	
D. If amending the registered agent an new registered agent and/or the ne			of the 1 0	- 1 d
Name of New Registered Agent	KIRAN KOUSHIK			
Name of New Registered Agem	19210, Pristine Pl		<del></del>	
	(Florida stre	et address)		
	Lutz		33558	
New Registered Office Address:		City)	Florida(Zip Code)	_
	·	• *		
New Registered Agent's Signature, if a linereby accept the appointment as regis	tered agent. I am familiar w		of the position.	
	Signature of New Re	egistered Agent, if changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Clear Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	рт <u>РТ</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) X Change	Dir	Kiran Koushik	19210 Pristine Pl
Add			Lutz, FL 33558
Remove			
2) X Change	Dir	Roopa Koushik	19210 Pristine Pl
Add			Lutz, FL 33558
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	heets, if necessary).	(De apregue)			
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an amendment p	provides for an exch	ange, reclassificat	tion, or cancellatio	<u>n of issued shares,</u>	
rovisions for imp	plementing the amenable, indicate N/A)	ndment if not con	tained in the amen	<u>dment itself:</u>	
	ble, indicate N/A)				
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The date of each amendment(s)	adoption:, if other the
date this document was signed.	
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	
•	(voting group)
The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
08/23/20	19
Dated Signature	
(By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	KIRAN KOUSHIK
	(Typed or printed name of person signing)
	DIRECTOR / REGISTERED AGENT
	(Title of person signing)



## Petition for Name Change

USC Form N

Department of Homeland Security U.S. Citizenship and Immigration Services

		· <del>-</del>	Name	of Court					
Į.	ıformation About You (Pet	itioner)				46			
	part of the naturalization process, you have or print clearly.)	ive the oppor	tunity to lega	illy change	your na	me. I	Please co	mplete Ite	m Number lines
•	Full and Correct Name (Current Name) Given Name (First Name) ROOPA		e Name				nily Naır RAN	ne (Last Na	ame)
2.	Street Number and Name	City or Town	1		. <del></del>			State FL	ZIP Code 33558-9043
3.	Country of Citizenship or Nationality India	4.	Date of Bir 01/22/1976		/yyyy) 	5.		Registration	n Number (A-Nur
6.	I certify that I am not seeking a charenforcement.	inge of name	for any unla	wful purpo	sc such	as the	avoidan	cc of debt (	or evasion of law
7.	I petition the court to change my name First Name ROOPA		: Namc				st Name JUSHIK		
8.	Signature and Date Signature of Pennson (Use your current	name)						Date (r	mm/dd/yyyy)
Œ	ertification of Name Chang	jei - Fr	7 2 5 Table 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	No.	. ::	•			
1 co	ertify that the above petition was granted	by the court	on this date,	MAY (m	1 <u>5</u> ım/dd/yy	201 <u>9</u> 201	3		
Sig	gnature of Clerk			Signatur	Cilla	uty G	piemo		
Ī	mportant Information	THE PERSON	State of the	الماهم إراه المركبة	eranizer or	ي المعالج الما الم	All Sign of	The Bulling Can Thirt was	
You will con	our copy of this petition, along with your liverify that you elected to change your rart.	Certificate of name, Your C	Naturalizati Certificate of	on, which Naturaliza	you will tion bea	recei rs you	ve upon i ir new na	taking the control that	onth of allegiance iged per order of



### Petition for Name Change

USCI Form N

Department of Homeland Security U.S. Citizenship and Immigration Services

<del>-</del>					
		Name of Court			
L					
I	nformation About You (Per	itioner)		الع في مراحة	in in the second
Αs	part of the naturalization process, you h			Please complete I	tem Number lines
1.	Full and Correct Name (Current Name	2)			
	Given Name (First Name)	Middle Name	Far	nily Name (Last	Name)
	KIRAN		<u>M\</u>	SORE RAMESI	1
2.	Mailing Address				
	Street Number and Name	City or Town		State	ZIP Code
	19210 PRISTINE PL	LUTZ		<u>FL</u>	33558-9043
3.	Country of Citizenship or Nationality	4. Date of Birth (mm/de	d/yyyy) <b>5.</b>	Alien Registrat	on Number (A-Nur
	India	10/14/1972		A-207075316	
6.	I certify that I am not seeking a chenforcement.	ange of name for any unlawful purp	ose such as the	avoidance of det	ot or evasion of law
7.	I petition the court to change my name	c to:			
	First Name	Middle Name		t Name	
	KIRAN	RAMESH	KC	USHIK	
8.	Signature and Date Signature of Petition (Use your curren	t name)			(mm/dd/yyyy) 3 26 2019
	Certification of Name Chan	ge	13. 4E <sub>3.</sub>		
∟ I c	ertify that the above petition was grante	d by the court on this date, HA	Y 15 20	19	
		(1	mm/d <b>d/</b> yyyy)	,	
Si	gnature of Clerk	Signatu	renof Deputy C	lesk	
	Elasion M. Warry		Cillians W	hons	
$\mathbf{I}_{i}$	mportant Information		10000	Carried Annual Control	
_	our copy of this petition, along with you	Cortificate of Naturalization, which	von will recei	ve upon taking th	c oath of allegiance
	If verify that you elected to change your				
	urt.				