## P19000008019

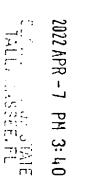
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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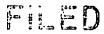
## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: PRATHNA INC			
DOCUMENT NUM	P10000008019			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	HEATHER WETSELL			
	<del></del>	Name of Contact Persor	<u> </u>	
	ARU BUSINESS SERVICES	S		
		Firm/ Company		
	6702 N GUNLOCK AVE			
		Address		
	TAMPA, FL 33614			
		City/ State and Zip Code	)	
	ARU.RENEWALS@GMAII	COM		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	on concerning this matter, pleas	se call:		
VALERIE BRYAN		at (	870-0060	
Name of Contact Person		Area Code & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



to

PRATHNA INC	2022 APR = 7 PM 3: U0
(Name of Corporation as current	ly filed with the Florida Dept. of State)
P1900008019	SEON STATE
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation;	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
	Thenew
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.	company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (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 add new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida st	rcet 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	t: with and accept the obligations of the position.
Signature of New I	Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being tiled 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	<u>PT</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>	Address
1) Change	T	DARSHANA PATEL	5612 CLOVERLEAF RUN
X Add			LAKEWOOD RANCH, FL 34211
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del> </del>
Remove			

amending or adding ttach additional sheet	s, if necessary).	(Be specific)				
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an amendment pro	uidec few up ava	hongo roclassifis	ation or cancell	ation of issued s	hares	
provisions for imple	manting the em	andment if not ac	ntoined in the e	mandment itself	-	
(if not applicable,	indicate M(4)	enument ii not co	mained in the a	menament usen	<u>.</u>	
(y nor appavame,	indicate (vizi)					
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	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		I a A
	(no more than 90 days after amendment file o	late)
<b>Note:</b> If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requires partment of State's records.	ments, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sha	areholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the officient for approval.	e amendment(s)
	proved by the shareholders through voting groups. The foll each voting group entitled to vote separately on the amend	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated 63	129/22 1xhts	
	irector, president or other officer – if directors or officers h	ave not been
	d, by an incorporator – if in the hands of a receiver, trustee	, or other court
appoin	ted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	<b>1</b>	
	fresident	
	(Title of person signing)	