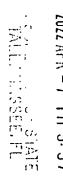
## P19 0000 28837

Office Use Only



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MPR -7 PM 3: 37

G 5/3/2022

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: RISHIKRIPA INC				
DOCUMENT NUN	P19000028837				
The enclosed Article	s of Amendment and fee are su	thmitted for filing.			
Please return all corr	espondence concerning this ma	atter to the following:			
	HEATHER WETSELL				
	<del></del>	Name of Contact Person	1		
	ARU BUSINESS SERVICES				
		Firm/ Company			
	6702 N GUNLOCK AVE				
	<del></del>	Address			
	TAMPA, FL 33614				
	City/ State and Zip Code				
	ARU.RENEWALS@GMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
VALERIE BRYAN		813 at (	870-0060		
Name	of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check	or the following amount made	payable to the Florida Depa	artment 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)		
Mailing Address Amendment Section Division of Corporations		Street Address  Amendment Section  Division of Corporations  The Centre of Tallahassee			
	). Box 6327 Hahassee, FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED

RISHIKRIPA INC 2022 APR - 7 PM 3: 37 (Name of Corporation as currently filed with the Florida Dept. of State) P19000028837 (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) \_\_\_\_, Florida New Registered Office Address: \_ (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

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.

r.xampie: <u>X</u> 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			<del>.</del>
Remove			
6) Change			
Add			
Remove			

ttach <i>additional sheet</i>	s, if necessary). (L	Be specific)				
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an amendment provocisions for impler					ares,	
(if not applicable,	indicate N/A)	ment i not con	tanica in the an	enument usen.		
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	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing require partment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without s	shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the Heient for approval.	he amendment(s)
• •	roved by the shareholders through voting groups. The foreach voting group entitled to vote separately on the ame	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
ьу	(voting group)	
	(voting group)	
Dated $\frac{3}{7}$	q / 7 Z  August 1	have not have
selected	, by an incorporator – if in the hands of a receiver, trusteed (iduciary by that fiduciary)	
	Cyped or printed name of person signing)	
	President (Title of person signing)	