## P19000 064 964

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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2019 0CT - 7 PH 3: 05

C. GOLDEN 00T 2 4 2019

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COI	RPORATION: ISHITA14 CORP	· 	<u> </u>
DOCUMENT N	IUMBER:	·	
	ticles of Amendment and fee are su	ibmitted for filing.	
Please return all	correspondence concerning this ma	atter to the following:	
	Akshay Dave		
		Name of Contact Person	1
	A+ Accounting & Tax		
		Firm/ Company	
	P O Box 372		
	-	Address	<del>-</del>
	Brandon FL 33509		
		City/ State and Zip Code	<u> </u>
	Tax4002@gmail.com		
	•	sed for future annual report	notification)
	·	-	
For further infor-	mation concerning this matter, plea	se call:	
Akshay Dave		at (813	381-3809
N	lame of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	eck for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing F	ce \$\sum \\$\\$43.75 \text{ 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 P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2019 OCT -7 PM 3: 05

( <u>Name of Co</u> 9000064964	rporation as currently filed with the f	
9000064964		Florida Dept. of State)
	(Document Number of Corporation (if I	(nown)
rsuant to the provisions of section 607.1006 Articles of Incorporation:	, Florida Statutes, this <i>Florida Profit C</i> o	orporation adopts the following amendment(s)
If amending name, enter the new name	of the corporation:	
	<u>-</u>	The _new
me must be distinguishable and contain for contain for co.," or the designation or d'"chartered," "professional association,	n Corp, Inc. or Co. A professi	or "incorporated" or the abbreviation ional corporation name must contain the
Enter new principal office address, if a rincipal office address MUST BE A STRE	oplicable: ET ADDRESS )	
Enter new mailing address, it applicable (Mailing address MAY BE A POST OF	le: FICE BOX)	
. If amending the registered agent and/o new registered agent and/or the new n	er registered office address in Florida, egistered office address:	enter the name of the
	handrakant J Patel	
Name of New Registered Agent	4000 S Tamiami Trl	
<u>.</u> .	(Florida street address)	
	orth Part	Florida 34287
New Registered Office Address:	orus rust	

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)

Remove

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	Y	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Chandrakant J Patel	14000 S Tamiami Trl
Add			North Port FL 34287
Remove			-
2) Change	<u>P</u>	Bhavinkumar S Patel	2916 Vintage View Cir
Add			Lakeland FL 33812
X Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	<del>-</del>
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the autificient for approval.	mendment(s)
	oproved by the shareholders through voting groups. The follower each voting group entitled to vote separately on the amendment	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and share	reholder
October	1, 2019	
DatedSignature	BEROPE	
	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, o	
	nted fiduciary by that fiduciary)	Tother court
,	Bhavinkumar S Patel	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>