P19000072307

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Amend

MAR () 4 2020 I ALBRITTON

COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SNL ONE INC		<u> </u>
DOCUMENT NUMBER: P19000072307		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
DOMINIC JOH	N	
	Name of Contact Person	1
DJ&J ASSOCIAT	TES	
	Firm/ Company	
2300 SE 17TH S	T, SUIT 200	
	Address	
OCALA, FL 34	4471	
	City/ State and Zip Code	
DJ_VENAD(@ҮАНОО.СОМ	
E-mail address: (to be u	used for future annual report	notification)
For further information concerning this matter, plea		
DOMINIC JOHN	at (_) 694-2004
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	artment of State:
■ \$35 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	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corp	poration as currently filed with the Florida Dept. of Stat	<u> </u>	
SNL ONE INC	N 1 0	57	
(1	Document Number of Corporation (if known)		
	Florida Statutes, this Florida Profit Corporation adopts the	following amendmen	nt(s) to
A. If amending name, enter the new name of	the cornoration:		
	the corporation.		
nome must be distinguishable and southing the and		The new	
"Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the ab "Inc," or "Co". A professional corporation name must abbreviation "P.A."	breviation "Corp.," at contain the word	
B. Enter new principal office address, if appl	iicahle		
(Principal office address <u>MUST BE A STREE</u> T		-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	F ROY)		
<u></u>	L BOX		
		<u> </u>	
		20 51 54	
D. It amending the registered agent and/or re new registered agent and/or the new regist	egistered office address in Florida, enter the name of the		1
	tered vince address.		
Name of New Registered Agent			اسفر
		PH 1	
	(Florida street address)	THE S	'ہ۔
New Registered Office Address:		Ş∷ 29	
New Negistered Office Address.	, Florida, Florida	(Zip Code)	
	,	(= },	
New Registered Agent's Signature, if changing	g Registered Agent:		
hereby accept the appointment as registered ag	gent. I am familiar with and accept the obligations of the po	osition.	
	Signature of New Projects and Asset St.		
	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.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	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) Change	VP	NARENDRA K NAIK	3886 BIGGIN CHURCH RD W
Add			JACKSONVILLE, FL 32224
X Remove			
2) Change	<u>VP</u>	GOBARKUMAR SHIROYA	192 STARLIS PLACE
X Add			ST. JOHNS, FL 32259
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

,- , -	mending or adding additional Articles, ach additional sheets, if necessary). (Be	e specific)	
	· · · · · · · · · · · · · · · · · · ·		
	<u> </u>		
			
			*
lf an	n amendment provides for an exchange	e, reclassification, or cancellation of issued shares,	
pro	ovisions for implementing the amendm	ent if not contained in the amendment itself:	
	(if not applicable, indicate N/A)		
			

• • • • •

02/01/2020 The date of each amendment(s) adoption: ____, if other than 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 block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) 02/06/2020 Dated Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) VIJAYAKUMAR RAMNIKBHAI RAKHOLIA (Typed or printed name of person signing)

(Title of person signing)