P19000090050

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AKISHA INC		
	BER: P19000090050		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	ALKA PATEL		
	_	Name of Contact Person	1
	AKISHA INC		
		Firm/ Company	
	203 WEST CRAWFORD ST	•	
		Address	· · · · ·
	QUINCY FL 32351		
		City/ State and Zip Code	:
	PATEL2419@BELLSOUTH	LNET	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
ALKA PATEL		at (850	294-7415
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depo	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	dling Address hendment Section rision of Corporations D. Box 6327 hahassee, FL 32314	Amend Divisio The Co	Address ment Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AKISHA INC (Name of Corporation as currently filed with the Florida Dept. of State) P19000090050 (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: 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) New Registered Office Address: 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

 $[\]square$ 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> Joh	<u>in Doe</u>	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PRESID	KUSH PATEL	203 WEST CRAWFORD ST
X Add			QUINCY FL 32351
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			sammen data a
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		···	
Add			
Remove			

(Attac	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)
•	
. <u>If an</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself:
<u> 191 (</u>	(if not applicable, indicate N/A)
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·

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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendmen	file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing re- Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	ut shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for sufficient for approval.	or the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the c	
"The number of votes c	ist for the amendment(s) was/were sufficient for approva	ı!
by		
	(voting group)	
Dated	eb 7th 2020.	
Signature	Afalt.	
(By sele	a director, president or other officer – if directors or officeted, by an incorporator – if in the hands of a receiver, trointed fiduciary by that fiduciary)	
	ALKA PATEL	
	(Typed or printed name of person signing)
	VICE PRESIDENT	
	(Title of person signing)	