## P20000026430

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO		USIC INC	
DOCUMENT NUM	P20000026430 BER:		
The enclosed Articles	of Amendment and fee are sul	omitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	Thomas Mathew (P)		
	THARANGAM MUSIC INC	Name of Contact Person	n
		Firm/ Company	<del></del>
	9700 Nw 48th Drive	Titue Company	
	Coral Springs. FL-33076	Address	
		City/ State and Zip Code	e
	stealthusa01@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	ce call:	
Thomas Mathew		954 at (	658-1291
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	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 P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

## Articles of Amendment to Articles of Incorporation of

THARANGAM MUSIC INC

P20000026430	f Corporation as current	ly filed with the Florida Dept. of State)	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1 ts Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the follow	ing amendment(s)
A. If amending name, enter the new na THARANGAM ENTERPRISE INC	me of the corporation:		The new
	orp," "Inc," or "Co".	company," or "incorporated" or the abbrevia A professional corporation name must cont	tion "Corp.,"
B. <u>Enter new principal office address, i</u> Principal office address <u>MUST BE A ST</u>		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			7020
(making data ess <u>mai be a i oar o</u>	TI KE BOA	N/A	
			:
). If amending the registered agent and			 ట్ల
new registered agent and/or the new	registered office addres Thomas Mathew	<u>s:</u>	
Name of New Registered Agent			_
	9700 Nw 48th Drive		
	(Florida si Coral Springs	reet address) 33076	
New Registered Office Address:		, Florida	p Code)

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:				
<u>X</u> Change	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action	Title	Name	<u>Addres</u> s	
(Check One)	V	SILVIA MATHEW	9700 Nw 48th Drive	
1) Change			Coral Springs	
Add			F1-33076	
Remove	CEO	SHAWN MATHEW		
2) Change X	<del></del>		Same as above	
Add				
Remove Change X	CEO	SHEENA MATHEW		
X Add				
Remove			Same as above	
	CEO	SHANNON MATHEW		
4) Change X Add				
			Same as above	
Remove	CEO	SHANE MATHEEW		
5) Change X				
Add			Same as above	
Remove				
n Change	_		<del></del>	
Add			<del></del>	
Remove			N/A	

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

.

N/A

The date of each amendment(s) adopti	on:	, if other than the
date this document was signed.	N/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment	
	(no more than 90 days after amendment	file date)
Note: If the date inserted in this block document's effective date on the Department.	does not meet the applicable statutory filing rec nent of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without	ut shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for approval.	or the amendment(s)
	d by the shareholders through voting groups. The voting group entitled to vote separately on the a	
	ne amendment(s) was/were sufficient for approva N/A	al "
by	(voting group)	
08/31/20		
Dated	_	
Signature	Malhew_	
	or, president or other officer – if directors or office an incorporator – if in the hands of a receiver, true	
-	ductary by that fiductary)	istee, or other court
	DMAS MATHEW	
	(Typed or printed name of person signing)	<del></del>
PRE	SIDENT	
	(Title of person signing)	