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COR AMND/RESTATE/CORRECT OR O/D RESIGN SHLOKYASHVI INC

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R. White

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SHLOKYASHVI	INC	
DOCUMENT NUMI		· 	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DHAVALKUMAR PATEL		
		Name of Contact Person	1
	SHLOKYASHVI INC		
		Firm/ Company	
	13900 S JOG RD STE 206		
		Address	
	DELRAY BEACH, FL 3344	6	
	-	City/ State and Zip Cod	e
	GRACEFINANCIALSERVI	CES@YAHOO.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
DHAVALKUMAR P	ATEL	at (561	827-9440
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio The C 2415 ?	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

- 711 1:55

SHLOKYASHVI INC	
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P20000057461	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
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 ad	
new registered agent and/or the new registered office addre	<u>:59\$:</u>
Name of New Registered Agent	
(Florida	street address)
New Registered Office Address:	, Florida
Ton hegan on office than the	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	<u>nt:</u> r with and accept the obligations of the position.
7, 0	, , ,
Signature of New	Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (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	<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	KALPESH M PATEL	9840 PINEAPPLE TREE DR
XAdd			APT 104
Remove			BOYNTON BEACH, FL 33436
2) Change	S	BHUPENDRABAI C PATEL	18 PEPPERWOOD CT
X Add			BOYNTON BEACH, FL 33426
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional A sheets, if necessary)). (Be specific)				
						
						
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COVISIONS TOT IT	able, indicate N/A)	rendificate in from	contained in the	amenument use	<u></u>	
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	01/05/2021	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.		
	01/05/2021	
Effective date <u>if applicable;</u>	(no more than 90 da	tys after amendment file date)
Note: If the date inserted in the	is block does not meet the applicable	e statutory filing requirements, this date will not be listed as the
locument's effective date on the	Department of State's records.	· · · · · · · · · · · · · · · · · · ·
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or boar	d of directors without shareholder action and shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The nur e sufficient for approval.	mber of votes cast for the amendment(s)
must be separately provided	approved by the shareholders through for each voting group entitled to vote east for the amendment(s) was/were su	
. DHAVALKUMAI	R PATEL, DINESHKUMAR N PATE	• • • • • • • • • • • • • • • • • • • •
by	(voting group)	
01/05/2	021	
Dated		_
Signature	Inhatel	
sele	a director, president or other officer – ected, by an incorporator – if in the har cointed fiduciary by that fiduciary)	- if directors or officers have not been nds of a receiver, trustee, or other court
	DHAVALKUMAR PATEL	
	(Typed or printed name	e of person signing)
	PRESIDENT	
	(Title of person signing	<u> </u>

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