Floridge Department of St Bivisith of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : KIM MARKS CPA
Account Number : 120120000072
Phone : (305)895-5815
Fax Number : (305)895-6273

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ZAIKA MIAMIO 9MAIL COM

COR AMND/RESTATE/CORRECT OR O/D RESIGN ZAIKA WESTON INDIAN CUISINE INC

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A. BUTLER
JUL 21 2022

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Corporate Filing Menu

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-Articles of Amendment to Articles of Incorporation of

FILED

- 2022 JUL 20 PM 1: 21

| ZAIKA WESTON INDIAN CUISINE INC | ◆ 2022 JUL 20 PM 1: 24 |
|--|---|
| (Name of Corporation as currently file P21000044463 | ed with the Florida Dept, of State) RY OF STATE TALLAHASSEE, FL |
| | |
| (Document Number of Cor | poration (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flori</i> ts Articles of Incorporation: | ida Profit Corporation adopts the following amendme |
| . If amending name, enter the new name of the corporation: | |
| | The new |
| ame must be distinguishable and contain the word "corporation," "complianc," or Co.," or the designation "Corp," "Inc," or "Co". A proceed on the contain "P.A." or "P.A." | |
| L. 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) | |
| If amending the registered agent and/or registered office address is new registered agent and/or the new registered office address: Name of New Registered Agent | in Florida, enter the name of the |
| Hume of them wedges en areni | |
| (Florida street aa | ridress) |
| y h : | , m |
| New Registered Office Address: (City) | , Florida |
| New Registered Agent's Signature. If changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with a | and accept the obligations of the position. |
| Signature of New Registe | ered Agent, if changing |
| | |
| Check if applicable The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F | |

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)

Example:

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.

| V.combe | E.L. | TOTAL TANA | • |
|-------------------------------|-----------------|---------------------------|------------------|
| X Remove | <u>v</u> | Mike Jones | |
| _X Add | <u>\$Y</u> | Sally Smith | ; |
| Type of Action (Check One) | Title | Name | Address |
| 1) Change | DIR | CHOUDHURY, NARESH | 2176 NE 123RD ST |
| Add | | | MIAMI FL |
| X Remove | | | |
| 2) Change | DIR | LOZANDI, LIZA | 2176 NE 123RD ST |
| Add | | | MIAMI FL 33181 |
| X Remove 3) Change | DIR | SHRIVASTAV, SHWETA | 2176 NB 123RD ST |
| Add | | | MIAMI FL 33181 |
| X Remove | | | · |
| 4) Change | DIR | KOTESH MALABANTI, SHIVASH | 2176 NE 123 ST |
| Add | | | MIAMI FL 33181 |
| X Remove | | | |
| 5) Change | | - | |
| Add | | | |
| Remove | | | |
| 6)Change | | | |
| Add | | | |
| Remove | | | <u> </u> |

| ech additional sheets, if no | onal Articles, enter change(s) here: cessary). (Be specific) | 1 |
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| <u>amendment provides (c</u> visions for implementing | r an exchange, reclassification, or can the amendment if not contained in th | cellation of issued shares, |
| (if not applicable, indica | s N/A) | ie sinceiument ictel: |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------------|
| | |
| 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 vidocument's effective date on the Department of State's records. | will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | t I |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required. | nd shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 | |
| by | |
| JULY 20, 2020 Dated | |
| Signature | <u>;</u> |
| (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) | į |
| NARESH CHOUDHURY | ļ |
| (Typed or printed name of person signing) | |
| REGISTERED AGENT | |
| (Title of person signing) | <u>'</u> |