P21000078096

(Re	equestor's Name)	
(Ac	dress)	-
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	· #)
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2022 HOV -7 AM 7: 46

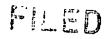
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: SARANGAPUR II	NC	
	BER: P21000078096		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	LALITABEN DESAI		
		Name of Contact Person	n
		Firm/ Company	•
	4510 APPLETON TER	. ,	
	NORTH PORT FL 34286	Address	
		City/ State and Zip Cod	e
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
DESALLALITABEN	<u> </u>	941 at (416-2157
Name of Contact Person		at (Area Co) de & Daytime Telephone Number
inclosed is a check for	the following amount made	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)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Ce 2415 N	Address Iment Section In of Corporations In of Tallahassee N. Monroe Street, Suite 810 Insec, FL 32303

Articles of Amendment to Articles of Incorporation of



SARANGAPUR INC		2022 NOV -7 AM 7: 46
(Name of Corporation as currently	y filed with the Florida Dept. of Sta	ite)
P21000078096		TALL A SSEE, FI
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts th	e 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," "a "Inc.," or Co.," or the designation "Corp." "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.A."	professional corporation name m	ıbbreviation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
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 new registered agent and/or the new registered office address		<u>16</u>
Name of New Registered Agent		
More of the regimered agent		
(Florida str	eet address)	
New Registered Office Address:	, Florid	J a
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar v		position.
Cirmin	arichaed Arant (fabourier	
	egistered Agent, if changing	
Check if applicable		

 \Box 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)

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.

X Change	<u> 6.1.</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	VP		MODI RAKESHKUMAR RAMANI	4510 APPLETON TER
X Add				NORTH PORT, FL 34286
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change		_		
Add				
Remove				

	additional sheets, if neces	wary, toe specific)	,		
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	<u></u>		·	 	· · · ·
					
		 -			
. <u>If an a</u> r	nendment provides for a	<u>an exchange, reclassi</u>	fication, or cancell	ation of issued share	· <u>s.</u>
provis	<u>ions for implementing tl</u>	he amendment if not	contained in the a	mendment itself:	
(i)	not applicable, indicate i	N/4)			
					

The date of each amendment(s) date this document was signed.	adoption:	, if other than
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date w Department of State's records.	/ill not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.	
The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
11/01/202 Dated	22	
Signature <u> </u>	logi	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need (iduciary by that fiduciary)	
	DESAI LALITABEN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

the

the