## P22000039990

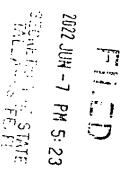
(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	#)
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PICK-UP	☐ WAIT	MAIL
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	ocument Number)	
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	





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A. BUTLER AUG 18 2022

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: SHREENATUR 2.	SINC	
	P2200030000		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	DHRUV PATEL		
		Name of Contact Persor	1
	PATEL & PATEL ACCOUN		
		Firm/ Company	
	4223 SW 33RD ST		
		Address	
	OCALA, FL 34474		
		City/ State and Zip Code	2
	PATELNPATEL@OUTLOC	OK COM	
		sed for future annual report	notification)
	on concerning this matter, pleas		301-7989
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
	or the following amount made		
\$35 Filing Fee	17\$43,75 Filing Fee & Certificate of Status	[]\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Cl\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An De P.C	Aniendment Section Amendment Section Division of Corporations O. Rox 6327 The Centre of Tallahassee Tallahassee FL 32314 2415 N. Monroe Street, Suite 810		lment Section on of Corporations entre of Tallahassee
1 (1)	llahassee, FL 32314		issee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILTO

SHREENATHJI 23 INC		2022 JUN - 7 PM 5: 23
(Name of Corporation	on as currently filed with the Florid:	a Dept. of State)
		SECRETAL STATE
(Docum	nent Number of Corporation (if known	
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	i Statutes, this <i>Florida Profit Corpora</i> .	tion adopts the following amendment(s) to
A. If amending name, enter the new name of the co	arporation:	
		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre	" or "Co". A professional corpora	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADI		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or register	red office address in Florida, enter t	he name of the
new registered agent and/or the new registered		
Name of New Registered Agent		
	(Florida street address)	<u></u>
New Registered Office Address:		, Florida
New Negrative Cypre Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<u>pstered Agent:</u> Tum familiar with and accept the obli	gations of the position.
The second secon		··
·	A Design to the second	
Sign	ature of New Registered Agent, if chan	iging —

Check if applicable

1.1 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;  $\hat{V}$  \* Vice President;  $\hat{T}$  = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. It 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	P <u>T</u> John	<u>Doe</u>	
X Remove	V <u>Mi</u> ke	<u>Jon</u> es	
_X Add	<u>SV</u> Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P 	ALPA AMIN	11254 NW 31ST LN
Add			GAINESVILLE, FL 32606
Remove			
2) _ Change			
Add			-
Remove 3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	<b></b> .		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
CHANGE THE NAST NAME PLEASE, FROM PATEL TO AMIN, FROM ALPA PATEL TO
CHARLE THE COAST NAME OF COAST AND TO ASSOCIATE TWO TO ASSOCIATE TO AS
ALPA AMIN
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
(if the if females, planetae cost)

99 to 8 to 10 - 10 - 10 - 10 - 10	05/11/2022	, if other than the
The date of each amendment(s) addate this document was signed.	ption:	. It other than the
05/11	2022	
Effective date <u>if applicable</u> :	(no more than 90 days after amendmen	n file date)
Note: If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing reartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	ted by the incorporators, or board of directors with	out shareholder action and shareholder
f 1 The amendment(s) was/were adop by the shareholders was/were suf	ted by the shareholders. The number of votes east ficient for approval.	for the amendment(s)
	oved by the shareholders through voting groups. I such voting group entitled to vote separately on the	
"The number of votes east f	or the amendment(s) was/were sufficient for appro-	val
by	(voting group)	
	(voting group)	
06/01/2022 Dated		
11		
Signature T	ector, president or other officer – if directors or off	Samuel have
	by an incorporator - if in the hands of a receiver, t	
	d fiduciary by that fiduciary)	ansite, or other court
,	LPA AMIN	
	(Typed or printed name of person signing	g)
(	OWNER	
	(Title of person signing)	