P22000053734

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SECRETARY OF A

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: AGANYTA INC		
DOCUMENT NUM	BER: P22000053734	···	
	s of Amendment and fee are sul	omitted for filing.	
Please return all corre	espondence concerning this made	tter to the following:	
	JULIE WILLIAMS		
		Name of Contact Persor	l
	JULIE WILLIAMS TAX LL	С	
		Firm/ Company	
	8833 Perimeter Park Blvd Sto		
		Address	
	Jacksonville, FL 32216		
		City/ State and Zip Cod	<u> </u>
	aganyta@juliewilliamstax.co		
	· - ·	ed for future annual report	notification)
For further informati	on concerning this matter, pleas TAX LLC	se call: 904 at (435-4000
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	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)
Ar Di P.(nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

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SECOND PH 3: 13	
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. Florida

(Zip Code)

(Name of Corporation as currently filed with the Florida Dept. of State P22000053734 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: NA name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: NA (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

(City)

Signature of New Registered Agent, if changing

Check if applicable

AGANYTA INC

☐ 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>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>	<u>Addres</u> s
1) X Change	P	PREM KUMAR PARAMESWARAN	12 WINDHAM CT
Add			FLEMINGTON, NJ 08822
Remove			
2) X Change	V	NARAHARA C DINGARI	339 TORTOLA WAY
Add			SAINT JOHNS, FL 32259
Remove 3) X Change	V	PRASAD SRIPATIII	20 RED BARN LANE
Add			FLEMINGTON, NJ 08822
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

NA					
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. <u>Ifan am</u> e	endment provides for an	exchange, reclass	ification, or cancell	ation of issued share	<u></u>
<u>provisio</u> (if n	ns for implementing the ot applicable, indicate N/.	<u>amendment if no</u> 4)	t contained in the a	<u>nendment itself:</u>	
₹A					
					· · · · · · · · · · · · · · · · · · ·
	 				

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date will no Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ac action was not required.	dopted by the incorporators, or board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
07/11/22 Dated		
Signature	director, president or other officer – if directors or officers have not been	
selecti	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 inted fiduciary by that fiduciary)	
	NARAHARA C DINGARI	
	(Typed or printed name of person signing)	