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TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: PANCHDEV INC		
DOCUMENT NUMI	BER: P23000015118		
	of Amendment and fee are sub	omitted for filing.	
Please return all corres	spondence concerning this mat	ter to the following:	
	DOMINIC JHN		
		Name of Contact Persor	
	DJ&J ASSOCIATIONS		
		Firm/ Company	
	2300 SE 17TH ST , BLD 200		
		Address	
	OCALA, FL 34471		
		City/ State and Zip Code	<u> </u>
	DJ_VENAD@YAHOO.COM	I	
	E-mail address: (to be us	ed for future annual report	notification)
For further informatio	n concerning this matter, pleas	e call:	
DOMINIC JOHN		at (<u>352</u>	694-2004
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	irtiment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

PANCHDEV INC

(Name of Corporation	as currently filed with the Florida Dept. of State)
23000015118	
(Documen	nt Number of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida St s Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corp	poration:
	The new
	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word ation "P.A."
Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRI</u>	<u>ESS</u>)
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(internal desired and internal	
. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	nce address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida(Zip Code)
ew Registered Agent's Signature, if changing Registe	t <mark>ered Agent:</mark> un familiar with and accept the obligations of the position.
tereny accept the appointment as registered agent. I a	an jumina sun una ucceps die vonganons of the position.
Signatur	re of New Registered Agent, if changing

Check if applicable

[☐] 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; 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 V Mike Jones X Add SVSally Smith Address Type of Action Title Name (Check One) HARSADKUMAR D PATEL 6564 CREWS LAKE CREST LOO 1) ____ Change LAKELAND, FL 33813 ____ Add Remove VP STARAMBHAI H PATEL 7724 SE 25TH AVE 2) Change OCALA, FL 34480 Add Χ 6564 CREWS LAKECREST LOO Remove HARSHADKUMAR D PATEL __ Change LAKELAND, FL 33813 Add Remove SITARAMBHAI H PATEL 7724 SE 25TH AVE VP 4) ____ Change OCALA, FL 34480 _ Add __ Remove 5) _____ Change Add _ Remove 6) ____ Change ___ Add Remove

	lling of two corporate of	officers name as:	above.		
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nrovisions for im	provides for an exchar plementing the amend	ige, reclassificat	ion, or cancellati	<u>on of issued share</u> ndment itself:	<u>:s,</u>
(if not applica	hle, indicate N/A)		The state of the s	Transfer Hyerr	

	<u> </u>	18-14-18			
			1.4.1.1.1.1		

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The date of each amendment(s) a	03/04/2023 doption: , if other than the
t ne date of each amendment(s) a date this document was signed.	doption:, if other than the
	04/2023
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
Harshadkumar D Pate	,,,
	(voting group)
03/04/2023 Dated	\$
Signature	Harshad Patel
selecte	lirector, president or other officer - if directors or officers have not been and, by an incorporator - if in the hands of a receiver, trustee, or other court attended fiduciary by that fiduciary)
	Harshadkumar D Patel
	(Typed or printed name of person signing)
	President
	(Title of person signing)