## P24000057788

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORA	ΠΟΝ:	SAFAYAR SURFACES	INC		
DOCUMENT NUMBER	<b>:</b>	P24000057788	P24000057788		
The enclosed Articles of A	Amendment and fee are su	ibmitted for filing.			
Please return all correspo	ndence concerning this ma	itter to the following:			
		RUPESH PATEL			
	<del> </del>	Name of Contact Persor	1		
_		Firm/ Company			
		10152 SH.VERBROOK T	RL		
_	Address				
JACKSONVILLE, FL 32256  City/ State and Zip Code					
		safayarsurfacesinc@gmail. sed for future annual report			
	E-man address, (to be u	seu for future annual report	nothication)		
For further information co	oncerning this matter, plea	se call:			
RUPES	H PATEL	at (	626 - 9111		
Name of Contact Person		Area Coo	de & Daytime Telephone Number		
Enclosed is a check for th	e following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations			
P.O. Bo Tallaha	x 6327 ssee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

SAFAYAR SURFACES INC

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to

<u> </u>		ZUZ4DCT 31
(Name of Corporation	as currently filed with the	Florida Dept. of State) Phi 1:58
	P24000057788	32 (1) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
(Documen	nt Number of Corporation (if	known) 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Pursuant to the provisions of section 607,1006, Florida St ts Articles of Incorporation:	tatutes, this <i>Florida Profit Ce</i>	prporation adopts the following amendment(
A. If amending name, enter the new name of the corp	oration:	
	<del></del>	The new
name must be distinguishable and contain the word "corp." "Inc" or Co.," or the designation "Corp." "Inc." o "chartered." "professional association," or the abbrevia	or "Co". A professional co	
3. 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)		
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered off</li> </ol>		nter the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe		
hereby accept the appointment as registered agent. I at	m familiar with and accept th	he obligations of the position.
Signatur	re of New Registered Agent.	if changing

Check if applicable

<sup>☐</sup> 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	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Nam</u>	<u>e</u>	<u>Addres</u> s
1) Change	D	_	BHAVESH PATEL	421 AMALURRA TRAII.
X Add				ST JOHN'S, FLORIDA 32259
Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				***
4) Change				
Add				
Remove				
5) Change				-
Add				
Remove				
6) Change				
Add				
Remove			•	

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f an amendment provides for an excl	hange, reclassification, o	r cancellation of issue	d shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained	l in the amendment its	<u>self:</u>
(у пол аррисионе, такше пол)			
<del></del>			
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···	<del></del>		

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The date of each amendment(s	10/16/2024 ) adoption:, if other than the
date this document was signed.	10/16/2024
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
Dated	72024
Signature	Tushaffund Para
(By : sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	TUSHARKUMAR HARISHANKAR RAVAL
	(Typed or printed name of person signing)
	INCORPORATOR
	(Title of person signing)