| City-State-Zip: | TALLAHASSEE FL 32311 | City-State-Zip: | GOSHEN NY 10924 |
|-----------------|---------------------------|-----------------|------------------------|
| Title | S | Title | S |
| Name | PATEL, SHEETAL | Name | PATEL, VILAS |
| Address | 141 SHAMROCK HILL DRIVE | Address | 2667 TOWAMENCIN AVENUE |
| City-State-Zip: | WAPPINGERS FALLS NY 12590 | City-State-Zip: | HATFIELD PA 19440 |
| Title | S | Title | S |
| Name | PATEL, MOUNIKA | Name | PATEL, BHARAT |
| Address | 10 CREST LANE | Address | 920 HARTFORD DR |
| | | City State Zin | |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: AMIPATEL

Electronic Signature of Signing Officer/Director Detail

Ρ

Date

Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

| Title | Р | Title | S |
|-----------------|---------------------------|-----------------|------------------------|
| Name | PATEL, AMI | Name | PATEL, PARUL |
| Address | 853 EAGLE VIEW DR | Address | 9 GABRIELLA TERRACE |
| City-State-Zip: | TALLAHASSEE FL 32311 | City-State-Zip: | GOSHEN NY 10924 |
| Title | S | Title | S |
| ritte | 3 | THE | 5 |
| Name | PATEL, SHEETAL | Name | PATEL, VILAS |
| Address | 141 SHAMROCK HILL DRIVE | Address | 2667 TOWAMENCIN AVENUE |
| City-State-Zip: | WAPPINGERS FALLS NY 12590 | City-State-Zip: | HATFIELD PA 19440 |
| | | | |
| Title | S | Title | S |
| Name | PATEL, MOUNIKA | Name | PATEL, BHARAT |
| Address | 10 CREST LANE | Address | 920 HARTFORD DR |
| City-State-Zip: | NEW MILFORD CT 06776 | City-State-Zip: | HATFIELD PA 19440 |
| | | | |

Current Mailing Address:

DOCUMENT# P17000068198

2101 W PENSACOLA ST

TALLAHASSEE, FL 32304

B

Entity Name: SHIVA LINGAM 1, INC.

Current Principal Place of Business:

2101 W PENSACOLA ST # B TALLAHASSEE, FL 32304 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

PATEL, MANISH 3511 N MONROE ST TALLAHASSEE, FL 32303 US

Date