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COVER LETTER

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TO: Amendment Section Division of Corporations

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NAME OF CORPOR	ATION: SHANI'S GROUP	INC	
DOCUMENT NUMB	P15000053044		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	DARSHANI LOKHNATII		
•	SHANES GROUP INC	Name of Contact Person	n
•		Firm/ Company	
	4111 NEPTUNE RD		
•		Address	
	ST CLOUD FL 34769		
•		City/ State and Zip Cod	· ·
	realtorshani@gmail.com		
•	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Darshani Lokhuath		at (9257708
Name o	f 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:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi: P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415	Address Innent Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

	ently filed with the Florida Dept. of State)
215000053014	
(Document Number	er of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:	<u>.</u>
barshani Lokhnath, P.A	The new
ime must be distinguishable and contain the word "corporation, lnc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.	""company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	2024 D
Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	EC F 27
	E ST
. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr	
Name of New Registered Agent	
Name of New Registered Agent	
	a street address)
	a street address)

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)

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>	<u>John Do</u>	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
_X Add	\underline{SV}	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				<u> </u>
Remove 3) Change		_		
Add				
Remove				
4) Change		_		-
Add				
Remove				
5) Change		_		
Add				44
Remove				
δ) Change		_		
Add ·				
Remove				

(Attach additional sheets,	idditional Articles if necessary).— (b	Re specific)	· 		

If an amendment provid	des for an evekano	reclassification	or cancellation (af icened chares	
provisions for impleme	inting the amenda	nent if not contain	ned in the amendi	nent itself:	
(if not applicable, in	udicate N/A)				

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The date of each amendment(s) date this document was signed.	option: $\frac{2}{8}$ $\frac{2024}{}$ if other than the second se
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament file date)
Note: If the date inserted in this document's effective date on the I	ck does not meet the applicable statutory filing requirements, this date will not be listed as a artiment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were accion was not required.	ted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.
	oved by the shareholders through voting groups. The following statement uch voting group entitled to vote separately on the amendment(s):
"The number of votes cas	or the amendment(s) was/were sufficient for approval
by	(voting group)
12/18/202 Dated	
Signature	
select	retor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)
	DARSHANI LOKHNATII
	(Typed or printed name of person signing)
	RESIDENT
	(Title of person signing)