

ND6000005759

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TO: Amendment Section
Division of Corporations

SUBJECT: SHIVA LINGAM MANDALI, INC.
(Name of Corporation)

DOCUMENT NUMBER: STATE REF. ID: N 06000005759

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAJINDRA LALLHARRY
(Name of Person)

(Name of Firm/Company)

2101 EISENHOWER BLVD,
(Address)

FORT LAUDERDALE, FL. 33316.
(City/State and Zip Code)

For further information concerning this matter, please call:

RAJINDRA LALLHARRY at (954) 548-7831.
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

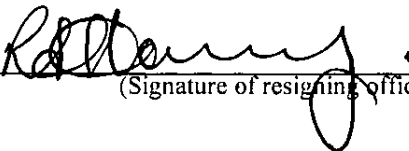
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RAJINDRA LALLHARRY, hereby resign as DIRECTOR/VICE PRESIDENT
(Title)

of SHIVA LINGAM MANDALI, INC.
(Name of Corporation)

STATE REF NO6000005759, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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