## NO 70000/0202

(Re	equestor's Name)	
(Ac	ddress)	
	•	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Вг	usiness Entity Nam	ne)
(Do	ocument Number)	
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SECRETARY OF STATE

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Bhawaai	ni Mandir, Inc.		
DOCUMENT NUMBER: N070000102	02		
The enclosed Articles of Amendment and	fee are submitted for filing.		
Please return all correspondence concerning	ng this matter to the following:		
Kuleshwarie Manghra			
(N	lame of Contact Person)		
Bhawani Ashram, Inc.		<u> </u>	
	(Firm/ Company)		
680 SW Colleen Avenue			
	(Address)		
Port St. Lucie, FL 34983		<u>.                                    </u>	
C For further information concerning this ma	ity/ State and Zip Code) atter, please call:		
_	•		
Kuleshwarie Manghra	at ( 772 ) 878-5896	1 1 1	
(Name of Contact Person)	(Area Code & Daytime Te	iepnone Number)	
Enclosed is a check for the following amou	unt made payable to the Florida Depart	tment of State:	
<b>7</b> \$35 Filing Fee	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street Address		
Amendment Section	* *************************************	Amendment Section	
Division of Corporations P.O. Box 6327	•	Division of Corporations	
P.O. BOX 0327 Tallahassee FL 32314	Clifton Building	2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



	LAHASSEF STATE	
Bhawaani Man		
(Name of Corporation as currently filed with	the Florida Dept. of State)	
N07000010		
(Document Number of Corpora	ation (it known)	
rsuant to the provisions of section 617.1006, Florida Statute following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Profit Corporation</i> a	
If amending name, enter the new name of the corporati	ion:	
hawani Ashram, Inc.		
e new name must be distinguishable and contain the wor breviation "Corp." or " Inc." <u>"Company" or "Co." may n</u>		
Enter new principal office address, if applicable:	680 SW Colleen Avenue	
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	Port St. Lucie, FL 34983	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	680 SW Colleen Avenue	
	Port St. Lucie, FL 34983	
If amending the registered agent and/or registered office amew registered agent and/or the new registered office a		
Name of New Registered Agent: Kuleshwarie	Kuleshwarie Manghra	
New Registered Office Address: 102 NW Ma	dison Ct rida street address)	
Port St. Luci		
	(City) (Zip Code)	
w Registered Agent's Signature, if changing Registered nereby accept the appointment as registered agent. I an sition.		

Page 1 of 3

Signature of New Registered Agent, if changing

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Deochan Dookran	3590 NW Adriatic Ln  Jensen Beach, FL 34957	_
<u>VP</u>	Keshwar Ketaroo	1541 SW Fortune Rd. Port St. Lucie, FL 34953	Add Remove
<u>VP</u>	Wahid Hussman		Add Remove
A SE - Maui TREA - Pun Chairman - President - I Vice Preside Treasurer -	ndai Mansook, 1541 SW Fortune Freen Hussman, 486 NW Reading Inderai Bissoon, 501 SW Fredrica State Deochan Dookran, 680 SW Collect Nalini Mangal, 672 SW Kenyoun State - Punerdai Bissoon, 501 Frede Dianne Thomas, 4837 SE Graham	Ln, Port St. Lucie, FL 34983 - St., Port St. Lucie, FL 34983 - St. Port St. Lucie, FL 34 St, Port St. Lucie, FL 34983 - A rica St., Port St. Lucie, FL 34	Remove  Remove  983 - Add  Add  983 - Add
	urer - Khemraj Manghra, 102 NW I		
	urer - Anjinee G. Dookran, 680 SW		
	Kuleshwarie Manghra, 102 NW Ma		
Asst. Secret	ary - Goutamie Sukhram, 3672 S\	V Karin St., Port St. Lucie, Fi	34953 - Add

The date of each amendment(s) adoption: March 22, 2009			
Effective date if applicable:	March 22, 2009		
was the set of the table as with a set of table as with	(no more than 90 days after amendment file date)		
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.		
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.		
Dated_ <b>Mar</b>	rch 22, 2009		
Signature	Deochan Doskran		
hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator — if in the hands of a receiver, trustee, over court appointed fiduciary by that fiduciary)		
	Deochan Dookran		
	(Typed or printed name of person signing)		
	Chairman		
	(Title of person signing)		