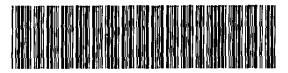
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SECRETARY OF STATE
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TRANSMITTAL LETTER

то:	Amendment Section Division of Corporations	
SUBJE	CT: <u>Lakshmi</u>	OF St. Augustine Inc (Name of Corporation)
DOCU	MENT NUMBER:	P03000099520
The enc	losed Officer/Director Re	esignation for a Corporation and fee are submitted for filing
Please r	eturn all correspondence	concerning this matter to the following:
	Parkaj Pater	
	(Name of P	erson)
	(Name of Firm/	(Company)
<u></u>	905 Whispering	Crue #4
	St Augustine, (City/State and	FL 3つ084 Zip Code)
For furt	her information concerni	ng this matter, please call:
Pa	(Name of Person)	at (904) 819-0602 (Area Code & Daytime Telephone Number)
Enclose	d is a check for \$35.00 m	ade payable to the Florida Department of State.
Amendr Division P.O. Bo	Address: ment Section n of Corporations x 6327 ssee, FL 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	Kamlesh Patel	hereby resign as Vice Presi	deat	_
			Title)	
of_	Lakshmi of St	- Augustine Inc ne of Corporation)		,
	(ivan	me of Corporation)		
	(Document Number, if known)	, a corporation organized under the laws of th	e State of	
	Florida			
	You -	(Signature of resigning officer/director)	SEGRETARY OF SEGRETARY OF	FILED
		FILING FEE IS \$35.00	AM IO: 57 OF STATE OF THOPE	

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

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