P06000143086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SHRINATHJI, INC
(Name of Corporation)

DOCUMENT NUMBER: P06000043086

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

Please return all correspondence concerning this matter to the following:

RAGHUVIR AMIN
(Name of Person)

(Name of Firm/Company)

8319 118TH AVE N
(Address)

LARGO, FL 33773
(City/State and Zip Code)

For further information concerning this matter, please call:

SACHIN AMIN at (813) 3683277
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
06 DEC -4 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, SACHIN AMIN, hereby resign as MANAGER
(Title)

of SHRINATHJI, INC
(Name of Corporation)

P06000043086
(Document Number, if known), a corporation organized under the laws of the State of

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