2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000087566

Entity Name: SKH GROUP, INC.

FILED Aug 19, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10449 ROSELLE ST SUITE 1 BLDG 49 3090 BIRD AVE 101 SAN DIEGO, CA 92121 MIAMI, FL 33133

Current Mailing Address: New Mailing Address:

 10449 ROSELLE ST SUITE 1 BLDG 49
 3090 BIRD AVE 101

 SAN DIEGO, CA 92121
 MIAMI, FL 33133

FEI Number: 20-5320370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES INC
2731 EXECUTIVE PARK DR SUITE 4
WESTON, FL 33331 US
KHANNA, SACHIN
3090 BIRD AVE 101
MIAMI, FL 33133 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SACHIN KHANNA 08/19/2009

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition Name: SPEAR, RICHARD E Name: KHANNA, SACHIN

 Address:
 10449 ROSELLE ST SUITE 1 BLDG 49
 Address:
 3090 BIRD AVE 101

 City-St-Zip:
 SAN DIEGO, CA 92121
 City-St-Zip:
 MIAMI, FL 33133

Title: V (X) Delete Title: () Change () Addition

 Name:
 SPEAR, RICHARD E
 Name:

 Address:
 10449 ROSELLE ST SUITE 1 BLDG 49
 Address:

 City-St-Zip:
 SAN DIEGO, CA 92121
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SACHIN KHANNA PSTD 08/19/2009