

(Re	equestor's Name)	
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(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
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09/14/09--01069--001 **35.00

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: LOVING ENTERPRISES, INC.	
(Name of Corporation)	-
DOCUMENT NUMBER: F 9.7 00000 6 8 45	_
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili	ing.
Please return all correspondence concerning this matter to the following:	
SHERRI WILLIAMS	
(Name of Person)	
LOVING ENTERPRISES, INC.	
(Name of Firm/Company)	
7885 BOCA CIEGA DRIVE	
(Address)	
ST. PETE BEACH, FL 33706	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
SHERRI WILLIAMS at (727) 363-6933 (Name of Person) (Area Code & Daytime Telephone Number	
(Name of Person) (Area Code & Daytime Telephone Number	r)
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

I, DAVID SMITH	, hereby resign as DIRECTOR		
	, , , , _	(Title)	
of LOVING ENTERPRISES INC	Corporation)	,	
	, a corporation organized under the law	vs of the State of	
ALABAMA			
Dave Sig	nature of resigning officer/director)	O9 SEP I 4 PM	
FI	LING FEE IS \$35.00	FS R	

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

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