

L47316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

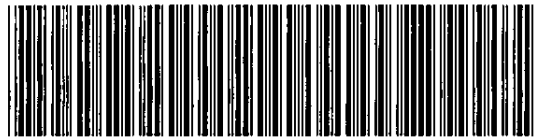
(Business Entity Name)

(Document Number)

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7/15/09*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Russell B Sanguedolce JR Inc
(Name of Corporation)

DOCUMENT NUMBER: L-47316

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

Please return all correspondence concerning this matter to the following:

Maria E Lewis
(Name of Person)

R-B Sanguedolce JR Inc
(Name of Firm/Company)

5722 NW 48ct
(Address)

Coral Springs, FL 33067
(City/State and Zip Code)

For further information concerning this matter, please call:

Maria Lewis at (954) 610-3882
(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

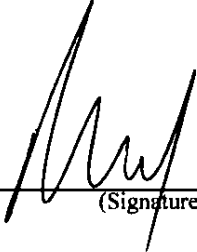
Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Russell B. Sanguedolce, hereby resign as Director
(Title)

of Russell B. Sanguedolce, JR., Inc.
(Name of Corporation)

L-47316, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

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TALLAHASSEE, FLORIDA

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