N05000011359 (Requestor's Name) (Address) 600102688566 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL 05/18/07--01017--017 **35.00 (Business Entity Name) (Document Number) Certificates of Status Certified Copies Special Instructions to Filing Officer: 18 PM 4:59 01) Kerign 05/30/07 Office Use Only

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:_	HIPDOG CANINE HYDROTHERAPY, IN	IC.

	(Name of Corporation)	
DOCUMENT NUMBER:	N05000011359	

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

Please return all correspondence concerning this matter to the following:

Beverly White McCartt

(Name of Person)

HIPDOG CANINE HYDROTHERAPY, INC.

(Name of Firm/Company)

1361 Ridgewood Avenue

(Address)

Winter Park, Florida, 32789

(City/State and Zip Code)

For further information concerning this matter, please call:

Beverly White McCartt

(Name of Person)

at (<u>407</u>) 539-2609 (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

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I,Beverly White McCartt	, hereby resign as_	Director	(Title)	
			(The)	
	THERAPY, INC.			_,
(188	ine of Corporation)			
N05000011359 (Document Number, if known)	, a corporation organized un	der the laws of t	the State of	
(Document Number, it known)				
Florida				
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	/(Signature of resigning officer/direc	tor)		
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	ole to Florida Department of S	iate and mail t	Ui ""	

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