

N09000003196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

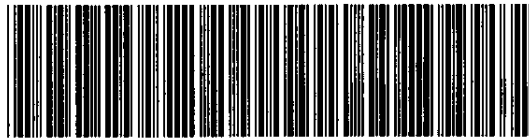
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Resign
C.COULLIETTE

APR 07 2010

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Miami Grow Project, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N09000003196

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

Please return all correspondence concerning this matter to the following:

Jeffery A. Bruff

(Name of Person)

The Miami Grow Project, Inc.

(Name of Firm/Company)

2950 NW 74th AVE

(Address)

Miami, FL 33122

(City/State and Zip Code)

For further information concerning this matter, please call:

Charles B. Coiner

(Name of Person)

at (305) 477-8833

(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:

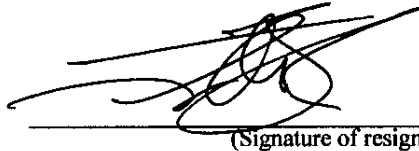
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Jeffery A. Bruff, hereby resign as Director / Board Member
(Title)

of The Miami Grow Project, Inc.
(Name of Corporation)

N09000003196, a corporation organized under the laws of the State of
(Document Number, if known)
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

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TALLAHASSEE, FLORIDA