N10000000938

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
. (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:
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SECRETARY OF STATEMY SIVISION OF CORPORAL TOWN

OD 1265

TRANSMITTAL LETTER

SUBJECT: USBG OF MIAMI, INC.

(Name of Corporation)

DOCUMENT NUMBER: N10000009378

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

Please return all correspondence concerning this matter to the following:

Name of Person)

Please of Firm/Company)

According Beach 304

(Name of Firm/Company)

Chy/State and Zip eode

For further information concerning this matter, please call:

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

_{I,} Laura Cullen	hereby resign as DVT and DP (Title)
of USBG OF MIAMI	, INC.
(Na	ume of Corporation)
N10000009378 (Document Number, if known)	a corporation organized under the laws of the State of
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