## N110000003554

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(City/State/Zip/Phone #)			
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## TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporation	s	
SUBJ	<sub>IECT:</sub> Luv My Fu	rbaby Rescue,	INC.
DOC	UMENT NUMBER: N1	1000003554	
The e	nclosed Officer/Director F	Resignation for a Corporation	on and fee are submitted for filing.
Pleas	e return all correspondence	e concerning this matter to	the following:
La	urie Satter		
	(Name of	Person)	_
	(Name of Firm	n/Company)	
4 8	Springfield St.		
	(Addr	ess)	<del>_</del>
Wil	lbraham, MA 0	1095	
	(City/State an	d Zip Code)	_
For fi	irther information concern	ing this matter, please call:	
La	urie Satter	<sub>at (</sub> 413	244-3825 de & Daytime Telephone Number)
	(Name of Person)	(Area Co	de & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 i	made payable to the Florida	a Department of State.
Amer Divisi P.O. I	ng Address: adment Section ion of Corporations Box 6327 assee, FL 32314	Street Address: Amendment Section Division of Corporati 2661 Executive Cente Tallahassee, FL 3230	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ւ Laurie Satter	, hereby resign as Director
	(Title)
of Luv My Furbaby I	Rescue, INC.
(Nar	me of Corporation)
N1100003554 (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