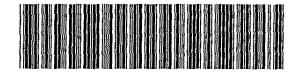
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| Special Instructions to | Filing Officer: | |
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TRANSMITTAL LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: SOUTHERN COUNTRY SOUTH FLORIDA (Name of Corporation) |
| DOCUMENT NUMBER: N 46053 |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| JUDY ARGENBRIGHT (Name of Person) |
| SOUTHERN COUNTRY SOUTH FLORIDA (Name of Firm/Company) |
| P 0 BOX 23512 (Address) |
| FORT LAUDERDALE, FL 33307 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| JUDY ARGENBRIGHT at (561) 706-1652 (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for \$35.00 made payable to the Florida Department of State. |
| Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399 |

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I. | DIANE (DEE) DE FON | IZO, , | hereby resign as | DIRECTOR | | |
|-----|------------------------------------|---------------------------------------|---------------------------------|---------------------|-------------------------|-------|
| , - | | | i= | (T | itle) | |
| of_ | SOUTHERN COUNT | RY SOUTH FLORI (Name of Corpor | DA ation) | | <u> </u> | |
| | N 46053 (Document Number, if ki | a corp | poration organized un | der the laws of the | State of | |
| | FLORIDA | · · · · · · · · · · · · · · · · · · · | * TELLIFIE | | | ų.: |
| | | Mill (Signature) | ortresignific of the certain of | (P) for) | SECRETAR OF TALLAHASSEE | FILED |
| | | FILING | FEE IS \$35.00 | | 7: 08 | |

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

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