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SLOWE TAKE OF STATE
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PDP 12/10/03

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
	ROUP OF COTURNIES JINC
DOCUMENT NUMBER:	0 0000 88272
	nation for a Corporation and fee are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
Milkage Ac (Name of Perso	As Gell
(Name of Firm/Cor	mpany)
OR Can So FC (City/State and Zip) For further information concerning t	
For the the information concerning t	ins matter, piease can.
(Name of Person)	at (
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	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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of VIP GROW OF Companies Inc.

(Name of Corporation)

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

(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