P01000111881

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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SECKETARY OF STATE
TALLAHASSEE, FLORIDA

OD Res.

COVER LETTER

DIVI:	sion of Corporations
SUBJECT:	Surge Solutions Group Inc
	(Name of Corporation)
DOCUMEN	NT NUMBER: P01000111881
The enclose	ed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
Ryan Sed	ldon
<u> </u>	(Name of Person)
Surge Sol	lutions Group Inc.
	(Name of Firm/Company)
8983 Oke	echobee Bivd # 202
	(Address)
West Paln	m Beach FI,
	(City/State and Zip Code)
For further i	information concerning this matter, please call:
Ryan Sedo	don at (561) 301-9092 (Area Code & Daytime Telephone Number)
	(Name of Person) (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

ZOOT SEP 26 AM 8: 00
SECRETARY OF STATE
TALLAHASSEF, F, CONTE

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Rick Sabha	, hereby resign as Vice President
·	(Title)
of_Surge Solutions Group Inc	
	e of Corporation)
201000111881, a corporation organized under the laws of the State	
(Document Number, if known)	
Florida	
B	Signature of resigning officer/director) SECRETARY OF STANSSEE, FLO

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