P01000111881

(Re	equestor's Name)	-
(Address)		
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(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

SUBJECT: Surge Solutions G	roup Inc.
4	(Name of Corporation)
DOCUMENT NUMBER: PO	1000111881
The enclosed Officer/Director Res	signation for a Corporation and fee are submitted for filing
Please return all correspondence of	concerning this matter to the following:
Ryan Seddon	
(Name of Pe	erson)
N/A	
(Name of Firm/C	Company)
5391 S.W. Windward Way	
(Address	(3)
Palm City Fl 34990	
(City/State and 2	Zip Code)
For further information concerning	g this matter, please call:
Ryan Seddon	at (561) 301-9092
(Name of Person)	at (561) 301-9092 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 ma	ide payable to the Florida Department of State.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Ryan Seddon	, hereby resign as CEO/President	
*·		(Title)
of_Surge Solutions Group Inc		,
(Nam	ne of Corporation)	
P01000111881 (Document Number, if known)	, a corporation organized und	der the laws of the State of
Florida	<u></u> ,	
	(Signature of resigning officer/directors	10 JUL -7 PH 3: 16

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