## P02000075096

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		
		}





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OB Resignation

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: One Seven Group, Inc.	
	of Corporation)
DOCUMENT NUMBER: PO2000075096 (E	EIN 27-0020830)
The enclosed Officer/Director Resignation for a Co	orporation and fee are submitted for filing.
Please return all correspondence concerning this tr	
	milet to the remaining.
RUBEN NELSON CASADO	
(Name of Person)	
ONE SEVEN GROUP, INC.	
(Name of Firm/Company)	
0000 NHM 00 OTDEET	
8933 NW, 23 STREET	
(Address)	
MIAMI, FLORIDA 33172	
(City/State and Zip Code)	er e
For further information concerning this matter, ple	ease call:
MARTA GONCALVES DA ROCHA	305 \ 592-0015
914	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the	· · · · · · · · · · · · · · · · · · ·
Mailing Address:  Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Division of Corporations Division of Corporations Tallahassee,	Section Corporations es Street

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L RUBEN NELSON CASADO	, hereby resign as DIRECTOR	
	(Title)	
of ONE SEVEN GROUP, INC.		
(Name	e of Corporation)	
PO2000075096	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA		
	<del></del>	

(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