

PO300000021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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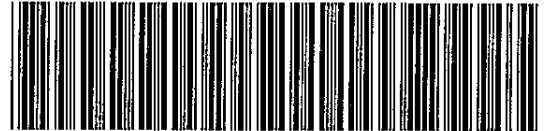
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Rs 11/8/05
O/D.les.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Micklewhite Acquisitions Group, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P03000006021

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Karlene L. Gray
(Name of Person)

Law Office of Karlene L. Gray, P.A.
(Name of Firm/Company)

13899 Biscayne Blvd. Suite #205
(Address)

North Miami Beach, FL 33181
(City/State and Zip Code)

For further information concerning this matter, please call:

Karlene L. Gray at (305) 341-3450
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

05 NOV -7 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Karlene L. Gray, hereby resign as Officer Director
(Title)

of Micklewhite Acquisitions Group, Inc.
(Name of Corporation)

P03000006021, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Karlene L. Gray
(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