P03000014918

(Re	equestor's Name)			
(Address)				
(Ad	idress)			
(Cit	ty/State/Zip/Phone	» #)		
PICK-UP	MAIT	MAIL		
(Ви	siness Entity Nan	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

(a 4,6,06



000068712630

03/28/06--01014--009 **35.00

FILED

06 HAR 28 AM II 1 00

SEYNGLINGSFF FI ORIDA

COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: 3 Visions Investment Group Inc
	(Name of Corporation)
DOC	CUMENT NUMBER: P 03000014978
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
jos	e A Garcia
	(Name of Person)
3 V	isions Investment Group Inc.
	(Name of Firm/Company)
619	Lake Ned Rd
	(Address)
Win	iter Haven, Florida. 33884
·	(City/State and Zip Code)
For f	urther information concerning this matter, please call:
Jose	A Garcia at (863) 221-5100 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clifto 2661	Mailing Address: Amendment Section Sion of Corporations On Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

ŧ Z

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

L	Victor Tejada	, hereby resion as	Vice President/ Secretary
7-			(Title)
of	3 Visions Investment Group	Inc.	
-	(Nam	e of Corporation)	*
P	(Document Number, if known)	, a corporation organized un	der the laws of the State of
F	orida	· ·	
		(Signature of reagning officer/direct	or)

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

