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(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Duciness Fakken)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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off living 4/18/03

April 11th, 2003

Division of Corporations P.O. Box 6327 Tallahassee Florida, 32314

Re: Liverpool Group, Inc. Officer Resignation

Dear Sir or Madam:

Enclosed, you will find one Original and two copies of: Officer Resignation along with a check #12780 in the amount of \$35.00 in order to have my name Jaime Chapov remove from the company above mentioned.

Please send it to my accountant office at:

Lleonart & Associātes, Inc. 782 N.W. 42nd Avenue #430 = Miami Florida, 33126

Thank you for your assistance regarding this matter.

Very truly yours, Jaime Chapov

Florida Department of State, Sandra B. Mortham, Secretary of State

OFFICER / DIRECTOR RESIGNATION

JAIME CHAPOV	_ + 1101003 1001511 163_
	(Title)
of Liverpool Group, INC.	
(Name of Cor	poration)
a corporation organized under the laws of the State of	of FLORIDA
and affirm that the corporation has been notified in w	vriting of the resignation.
(Stoppange of	resigning officer/director)

FILING FEE IS \$35.00

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314