P03000058889

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





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06/19/08--01008--018 **35.00

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SECRETARY OF STATE

officer Resignation
18 6/20/08

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	noight	lo Re	cover	y. Inc.	
DOCUMENT N	NUMBER: PO	300	of Corporation)	7'	

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

Please return all correspondence concerning this matter to the following:

Horvey Brown (Name of Person)
Insight To Recovery, Inc (Name of Firm/Company)
7425 IVW. 4 Street (Address)
Phototion, FL 3331M (City/State and Zip Code)

For further information concerning this matter, please call:

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

Alla Maria Maria State Constant Stat a corporation organized under the laws of the State of

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

