P03000084991

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





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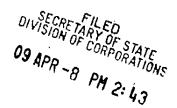
M/Rie leses

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COVER LETTER

	endment Section sion of Corporations
SUBJECT:	South Concord Corp.
	(Name of Corporation)
DOCUME	NT NUMBER: P03000084991
The enclose	d Officer/Director Resignation for a Corporation and fee are submitted for filing
Please retur	n all correspondence concerning this matter to the following:
Angela M	usgrave
	(Name of Person)
South Co	ncord Corp.
	(Name of Firm/Company)
14000 Mil	itary Trail, Suite 206B
	(Address)
Delray Be	each, Florida, 33445
	(City/State and Zip Code)
For further	information concerning this matter, please call:
Dwayne B	at ()
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is	a check for \$35.00 made payable to the Florida Department of State.
Street Addr Amendment Division of Clifton Buil 2661 Execu Tallahassee.	Amendment Section Corporations Division of Corporations ding Post Office Box 6327 tive Center Circle Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



Angela Musgrave	, hereby resign as Director
.,	(Title)
of South Concord Corp.	
	e of Corporation)
P03000084991	, a corporation organized under the laws of the State of
(Document Number, if known)	
Florida	
**************************************	_

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