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ECRE FARY OF STATE LAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Phive, Inc.				
1	(Name of Corporation)			
DOCUMENT NUMBER: 1				
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing.			
Please return all correspondence con	cerning this matter to the following:			
Paul Mills				
(Name of Perso	on)			
Phive, Inc.				
(Name of Firm/Cor	npany			
108 Columbia Drive, #1B * Please note new business (Address) (Address)				
Tampa, FL 33608				
(City/State and Zip	Code)			
For further information concerning t	his matter, please call:			
Beni Brock	at (727) 417-2274			
(Name of Person)	at (727) 417-2274 (Area Code & Daytime Telephone Number)			
Enclosed is a check for \$35.00 made	payable to the Florida Department of State. (1 Le L + 2455			
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



1	Beni Brock	hereby resign as	VP, Secretary and Treasure
-> _			(Title)
of	Phive, Inc.		
		(Name of Corporation)	
1	(Document Number, if known)	, a corporation organized un	der the laws of the State of
Fle	orida		

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

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