## P04000051209

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
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## TRANSMITTAL LETTER

SUBJECT: FINANCIAL RISK INVESTMENT, INC.
(Name of Corporation)
DOCUMENT NUMBER: P04000051209
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
JUDITH C CARLSON
(Name of Person)
JUDITH C CARLSON, CPA, PA
(Name of Firm/Company)
1812 NW 36TH COURT
(Address)
OAKLAND PARK, FL 33309
(City/State and Zip Code)
For further information concerning this matter, please call:
JUDITH C CARLSON at ( 954 ) 484-8792
JUDITH C CARLSON at ( 954 ) 484-8792  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

TO: Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, STEPHANIE A GALLITANO	, hereby resign as_ DIRECTOR	
	(Title)	
of_FINANCIAL RISK INVESTME	·	
(Name	of Corporation)	
P04000051209	, a corporation organized under the laws of the State of	
(Document Number, if known)		
FLORIDA	<del>.</del>	
	704 104	<b>)</b>
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	Signature of resigning officer/director)	
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## 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