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Office Use Only



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COVER LETTER

| FO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Empire Capital Group Inc (m) all subside |
| (Name of Corporation) |
| DOCUMENT NUMBER: |
| The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| JOSEPH R JALBERT (Name of Person) |
| (Name of Person) |
| (Name of Firm/Company) |
| |
| 5051 Castello Dr #6 |
| (Address) |
| NAPLES R 34/03 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| JOSEPH-R JAUBERT at 239,777-0392 |
| (Name of Person) (Area Code & Daytime Telephone Number) |

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

| I, | JOSEPH JAUBERY, hereby resign as Vice Prosident (Title) | |
|-----|---|----|
| of_ | EMPIRE CAPITAL GROUP TNC (AND ALL SUBSIDIAR (Name of Corporation) | 16 |
| | (Document Number, if known) CLORIOA | |
| | PLOPION | |
| | (Signature of resigning officer/director) | |
| | ξ _o | |
| | FILING FEE IS \$35.00 FILING FEE IS \$35.00 | |
| | Make checks payable to Florida Department of State and mail to: $\frac{F_{ER}^{T}O_{F}}{20}$ F_{E | |
| | Amendment Section | |

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