P04000149334

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to Filing Officer:		





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09/19/05--01029--005 **35.00

SECRETARY OF STATE OF CORPORATIONS

0/1) Resign.
0 9/26/05

COVER LETTER

SUBJECT: Executives Condit Group (Name of Corporation)
DOCUMENT NUMBER: PO4000149334
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Firm/Company)
132 E, colone Dr. Suite 214 (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
1057) 1057 at (407) 782-136) (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:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Justin Dr	hereby resign as U	
	(Title)	
of Executive	Credit Group, Inc.	_,
Po 4000 4933 4 (Document Number, if known)	, a corporation organized under the laws of the State of	
Florida		

(Signature of resigning officer/director)

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 DIVISION OF CORPORATIONS
OF SEP 19 PM 4: 11