P0500003478

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UI	P WAIT	MAIL
	(Business Entity Name)	4 to 5 to
	(Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	s to Filing Officer:	
	Office Use Only	



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SECRETARY OF STATE
TALLAHASSEE FINALE

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Phoenix Fizon (Name of Corporation) DOCUMENT NUMBER: POSOO 000 3 4 78
(Name of Corporation)
DOCUMENT NUMBER: P 0 5 0 0 000 3 4 78
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Wilberto Montes (Name of Person)
(Name of Person)
Premier Executive Investment (Name of Firm/Company)
(Name of Finite Company)
378 Southern Charm Dr. (Address)
(Address)
0-lando \$6 32807
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (407) 247-6010 (Area Code & Daytime Telephone Number)
(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

CR2E044(08/05)

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Wilber	to M	untes	_, hereby resign as	VPC	(Title)	_
of Phoen	·ιχ	Rizon (Name of Corporat	(orporo	tion	·	,
P050000 (Document Num		a corpo	oration organized und	er the laws of t	he State of	
Florida		·				
				•	ΤΑ O.	
_		Will		6	06 MAY 10 SECRETAR FALLAHASS	Contraction of the Contraction o
		(Signature of	resigning officer/director	or)	PM Y OF	
					2: 57 STATI	لمستعدد

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

COVER LETTER

TO: Amenda Division	ment Section n of Corporations
SUBJECT:	Phoenix Rizon Corporation (Name of Corporation)
	NUMBER: P 0 500 000 3 4 78
	Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return al	I correspondence concerning this matter to the following:
	Ryan 5 Dass (Name of Person)
	(Name of Person)
	Phoenix Rizon (Name of Firm/Company)
378	Sowther Charm D.r (Address)
((City/State and Zip Code)
For further info	rmation concerning this matter, please call:
Ryan	S Doss at () (Name of Person) at () (Area Code & Daytime Telephone Number)
Enclosed is a cl	neck for \$35.00 made payable to the Florida Department of State.
Street Address Amendment Ser Division of Cor Clifton Building 2661 Executive Tallahassee, FL	ction Amendment Section porations Division of Corporations Post Office Box 6327 Center Circle Tallahassee, FL 32314