

PS000126068

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*[Handwritten signature]*  
3-23-11

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LORICH INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P05000126068

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ARLENE BERKMAN  
(Name of Person)

LORICH INC.  
(Name of Firm/Company)

8903 N.W. 34<sup>TH</sup> STREET  
(Address)

COOPER CITY FL 33024  
(City/State and Zip Code)

For further information concerning this matter, please call:

ARLENE BERKMAN at (954) 243-4003  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

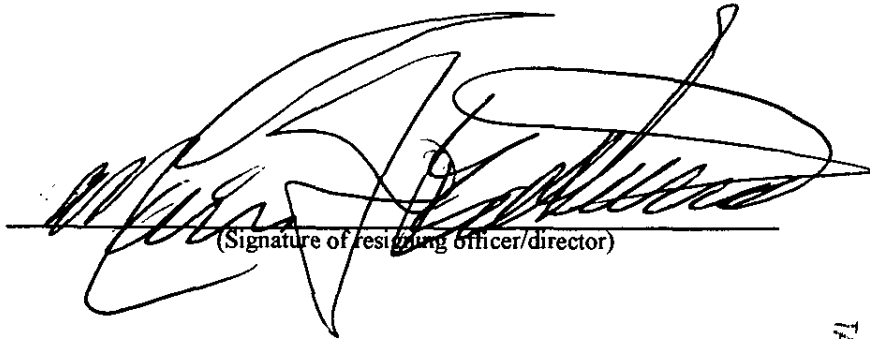
**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, MARVIN BERKMAN, hereby resign as SECRETARY / TREASURER  
(Title)  
of LORICIT INC.  
(Name of Corporation)

P05000126068, a corporation organized under the laws of the State of  
(Document Number, if known)  
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

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TALLAHASSEE, FLORIDA