

PO60000015701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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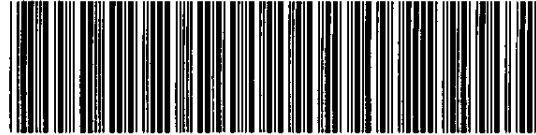
(Business Entity Name)

(Document Number)

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08 JUN -2 PM 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

J. Roberts JUN 04 2008

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EXECUTIVE COACH FLORIDA INC.
(Name of Corporation)

DOCUMENT NUMBER: P06000015701

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

Please return all correspondence concerning this matter to the following:

MURRAY WOLKOVE

(Name of Person)

EXECUTIVE COACH FLORIDA INC.

(Name of Firm/Company)

596 SOUTH LONGVIEW PLACE

(Address)

LONGWOOD, FL 32779.

(City/State and Zip Code)

For further information concerning this matter, please call:

MURRAY WOLKOVE

(Name of Person)

at (407) 812-7699

(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**

FILED
08 JUN -2 PM 09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MURRAY WOLKOVE, hereby resign as DIRECTOR, VICE PRESIDENT,
TREASURER, REGISTERED
AGENT.
of EXECUTIVE COACH FLORIDA INC.
(Name of Corporation)

P06000015701, 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