Pilan	:0587/2-
(Requestor's Name) (Address) (Address)	000199820240
(City/State/Zip/Phone #) PiCK-UP (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Office Use Only	03/31/1101008023 **35.00



TO: Amendment Section Division of Corporations

SUBJECT: RIGNEY CONSULTING GROUP, INC.

(Name of Corporation)

DOCUMENT NUMBER: P06000058712

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

Please return all correspondence concerning this matter to the following:

ROBERT E. RIGNEY, JR.

(Name of Person)

(Name of Firm/Company)

7820 LAUREL GLEN WAY APT. F

(Address)

SYLVANIA, OHIO 43560

(City/State and Zip Code)

For further information concerning this matter, please call:

 ROBERT E. RIGNEY, JR.
 at (______315_)
 263-4948

 (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 <u>Mailing Address</u>: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION		
I,ROBERT E. RIGNEY, JR.	, hereby resign as PRESIDENT (Title)	
of RIGNEY CONSULTING GROU	IP, INC. f Corporation)	
P06000058712 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA	-•	
(St	gnature of resigning officer/director)	

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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