| (Re                     | equestor's Name)   | · · · · · · · · · · · · · · · · · · · |
|-------------------------|--------------------|---------------------------------------|
| (Ac                     | idress)            |                                       |
| (Ac                     | ldress)            |                                       |
| (Ci                     | ty/State/Zip/Phon  | e #)                                  |
| PICK-UP                 | ☐ WAIT             | · MAIL                                |
| (Bi                     | isiness Entity Nai | me)                                   |
| (Do                     | cument Number)     |                                       |
| Certified Copies        | _ Certificate:     | s of Status                           |
| Special Instructions to | Filing Officer:    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         | Office Use Or      | nly                                   |



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## **COVER LETTER**

| TO: Amendment Sec<br>Division of Con  |   |
|---|---|
| SUBJECT: Bogartz  | Cigar Lounge, Inc.  |
|   | (Name of Corporation)   |
| DOCUMENT NUMB   | ER:P06000135242   |
| The enclosed Officer/D  | irector Resignation for a Corporation and fee are submitted for filing  |
| Please return all corresp   | condence concerning this matter to the following:   |
| Chester J. Trow, Esc  | quire   |
|   | Name of Person)   |
| Chester J. Trow, P.A  | ٨.  |
| (Nam  | ne of Firm/Company)   |
| 21 N. Magnolia Ave  | nue, 2nd Floor  |
|   | (Address)   |
| Ocala, FL 34475   |   |
| (City   | /State and Zip Code)  |
| For further information   | concerning this matter, please call:  |
| Chester J. Trow   | at ( 352 ) 369-8830  (Area Code & Daytime Telephone Number)   |
| (Name o   | 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 Corporation Clifton Building 2661 Executive Center Tallahassee FL 32301 | Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Circle Tallahassee, FL 32314 |

n ( )

## **RESIGNATION**

The undersigned, ROBERT S. LORING, effective July <u>13</u>, 2007, resigns as officer, director, and agent of BOGARTZ CIGAR LOUNGE, INC., a Florida corporation.

DATED this \_\_\_\_ day of July 2007.

Róbert S. Loring

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SECRLIARY OF STATE
TALL AHASSEE, FLORID