(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: P1 GROUPE INC (Name of Corporation)
DOCUMENT NUMBER: PO6000 143955
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
FRIC BURCH (Name of Person)
P16ROUPE INC (Name of Firm/Company)
(Name of Firm/Company)
PO Box 161528 (Address)
ALTAMONTE SPUNGS, FL 32716 (City/State and Zip Code)
For further information concerning this matter, please call:
ERIC BURCH at (407) 697.1109 (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, JEFF EASTERLING	, hereby resign as DIRECTOR (Title)	
of PI GROUPE INCOR	ANR ATETO	
·	of Corporation) _, a corporation organized under the laws of the State of	,
FLORIDA		IF 80
	HA SE	FILED WN 27
		H 2: 28
(Si	gnature of resigning officer/director)	n co

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