(Requestor's Name)		
(Address)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
`		

Office Use Only



100237553651

07/23/12--01040--023 \*\*35.00



## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Lucas L Browning	hereby resign as	Vice President
"		(Title)
of The Browning Agency Inc		
(Name of Corpor	ation)	
P08000018882 , a corp	ooration organized ur	nder the laws of the State of
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 12 JUL 23 PM 12: 19