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(Re	equestor's Name)	
(Ad	ldress)	<u> </u>
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(Cit	ty/State/Zip/Phone	e #)
• PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ · Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Amendment Section Division of Corporations

TO:

•
SUBJECT: Gro Green Scruces, Inc. (Name of Corporation)
DOCUMENT NUMBER: PO 80000 22253
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Tenct Kalman (Name of Person)
(Name of Firm/Company)
5232 Brighton Shore Dr. (Address)
Apollo Beach, FL 33572 (City/State and Zip Code)
For further information concerning this matter, please call:
Tanct Kalman at (813) 404-6904 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1, Janet	Kalman	, hereby resign as	Secreta	ny Title S
ofG	O Green S (Name of Corpo	oration)	Inc.	,
PO 80000 20 (Document Number	2253, a co	rporation organized und	der the laws of the	State of
_Florida	<i></i> .			P 09 FEB SEURE!
				-2 PM -2 PM ANY OF ASSEE,
, der-serve	Jane	f/// e of resigning officer/direct	05)	M 1:49 F STATE F FLORIDA
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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

This 21th January of January of January of

