P08000041213

(R	Requestor's Name)
(A	ddress)
(A	address)
(C	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	Business Entity Name)
· (D	Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Office
Special Instructions to	o xive

Office Use Only



300138497623

12/10/08--01006--008 **35.00

SECRETARY OF STATE PLANTS SECRETARY OF STATE PLANTS SEE FLORING STATE OF ST

COVER LETTER

	n :- `		Male Area	C .
SUBJECT:	Premier	LUSS (Nar	Mitigation ne of Corporation)
DOCUMENT NUM	BER:	PO 200	00 41213	
The enclosed Officer/	Director Resign	ation for a	Corporation and	fee are submitted for filing
Please return all corre	spondence conc	erning this	matter to the fol	lowing:
Greg P	csctsky (Name of Persor	n)		
Premier e (Na	Loss ,	Mitigati	on Group	
17952	J.Wi 35 (Address)	ct		
Mirama (Ci	ty/State and Zip (011 Code)	· · · · · · · · · · · · · · · · · · ·	
For further information	on concerning th	is matter, p	lease call:	
Grea Pesa	of Person)	at	(¶5 \) (Area Code & D	732-8785 Paytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section Division of Corporations

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,	Greg Pesets	1			JAN	Title) · .	,	
of	Prenier	(Name of Corp	Mitigation Groomation	aup ,				٠,
	P0800004(213 (Document Number, if known	, a co	orporation organized	under the la	ws of t	he State o	of	
	FL	·						
				r t		FAS		
		(Signatu	Pathy re of resigning officer/di	irector)	Î	ECRETA	9 JAN 13	
						7	=	m
						STAT	8; 2J	O

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314