

P08000105302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

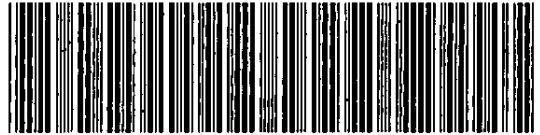
(Business Entity Name)

(Document Number)

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10/05/09--01010--014 \*\*35.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

010 Resign.  
10/9/09  
DC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Brockman Group, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000105302

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS DIAZ  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

4955 INTERNATIONAL DRIVE #1C-04  
(Address)

ORLANDO, FL 32819  
(City/State and Zip Code)

For further information concerning this matter, please call:

CARLOS DIAZ at ( 407 ) 6686545  
(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

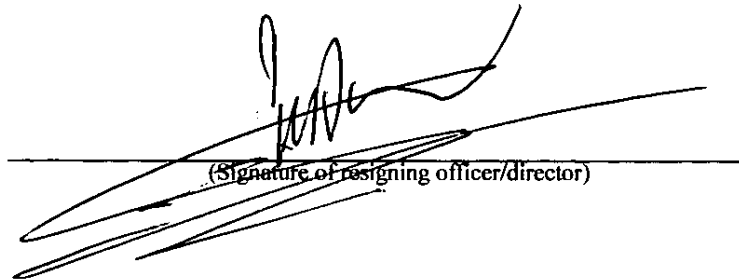
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, CARLOS DIAZ, hereby resign as DIRECTOR  
(Title)

of BROCKMAN GROUP, INC.  
(Name of Corporation)

PO8000105302, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA.

  
(Signature of resigning officer/director)

**FILED**  
09 OCT -5 AM 8:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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