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





100207501611

05/12/11--01007--017 **35.00

COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: Phoenix 2, Inc
	(Name of Corporation)
DOG	CUMENT NUMBER: P08000105956
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	se return all correspondence concerning this matter to the following:
Ма	rk Vogelsang
	(Name of Person)
	(Name of Firm/Company)
P.C	D. Box 780516
-	(Address)
Orla	ando, Florida 32878
	(City/State and Zip Code)
For f	further information concerning this matter, please call:
Mar	k Vogelsang at (954) 263-6843 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divis Clifto 2661	Mailing Address: Indment Section Sion of Corporations On Building Executive Center Circle hassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Mark Vogelsang	hereby resign as	Secretary	
*,	nercoy resign as	(Title)	
of Phoenix 2, Inc			
(Name of Corporation)		
P08000105956	, a corporation organized ur	, a corporation organized under the laws of the State of	
(Document Number, if known)			
Florida			
m	(Signature of resigning officer/direct	tor)	
	/	DIVISION 11 MA	

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