

PO90000010520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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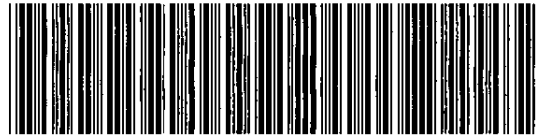
(Business Entity Name)

(Document Number)

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@ 8/19/09

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

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

**DOCUMENT NUMBER:** P09000010520

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Suzanne E Morton

(Name of Person)

Compleat Consulting Group, Inc.

(Name of Firm/Company)

500 Chapel Hill Blvd.

(Address)

Boynton Beach, FL 33435

(City/State and Zip Code)

For further information concerning this matter, please call:

Suzanne E. Morton

(Name of Person)

at ( 561 ) 389-5102

(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, Claudia A. Coleman, hereby resign as President Treasurer, Director  
(Title)

of Compleat Consulting Group, Inc.  
(Name of Corporation)

09000010520, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

*Claudia Coleman*

(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

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