(Pa	equestor's Name)	
(re	questor s Name)	
(Ac	ldress)	
(AC	iaress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to	Eiling Officer	<u> </u>
Opecial instructions to	i iiiig Otticet.	

Office Use Only



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Of / Rev Reign

2 Woberts DEC:10,1150

COVER LETTER

SUBJECT: Harvard Trading Group Inc (Name of Corporation) DOCUMENT NUMBER: PO9 00 00 19072				
DOCUMENT NUMBER: <u>P09</u> 000019072				
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jamie B. Campany (Name of Person)				
(Name of Firm/Company)				
2290 104 Ave N Suite 200 (Address)				
Lake Worth PL33461 (City/State arld Zip Code)				
For further information concerning this matter, please call:				
Tamie Campany at (Sol) 588-129 (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

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

TO:

Amendment Section Division of Corporations

OFFICER / DIRECTOR RESIGNATION PH 12: 02

<u>1, Tamie B. Campan</u>	, hereby resign as	Directur
		(Title)
of Har Vard Tradin	a Group Inc	
	offCorporation) \ /	
(Document Number, if known)	_, a corporation organized un	der the laws of the State of
Florida		

(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