

P09 0000 77631

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

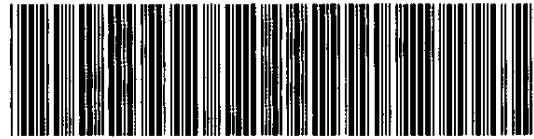
(Business Entity Name)

(Document Number)

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10 JUL 27 PM 2:08  
SECRETARY OF STATE  
TREASURY DEPT

O/D Resign.

7-27-10

DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SQUARE SIX GROUP CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000077631

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

Please return all correspondence concerning this matter to the following:

FABIAN CONDE

(Name of Person)

STEPTRADE CORP

(Name of Firm/Company)

909 NORTH 13 CT

(Address)

HOLLYWOOD FLORIDA 33019

(City/State and Zip Code)

For further information concerning this matter, please call:

FABIAN CONDE

(Name of Person)

at ( 954 ) 3946940

(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, MARIO FELIPE MONTOYA, hereby resign as PRESIDENT  
(Title)

of SQUARE SIX GROUP CORP  
(Name of Corporation)

P09000077631, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
10 JUL 27 PM 2:00  
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