

P09000094188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

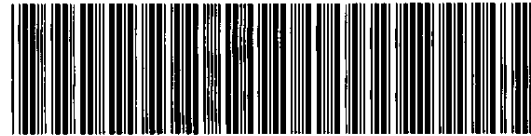
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

*DBB Resign*  
C.COULLIETTE

JUL 19 2010

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CLASS ACT MANAGEMENT GROUP, INC  
Name of Corporation

**DOCUMENT NUMBER:** P09000094188

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

COLIN FORBES  
Name of Contact Person

CLASS ACT MANAGEMENT GROUP, INC  
Firm/Company

1876 N. UNIVERSITY DRIVE SUITE 201 /201A  
Address

PLANTATION FL 33322  
City/State and Zip Code

COLIN@CLASSACTPRO.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

COLIN FORBES at ( 954 ) 306-6155  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, MARLINE POTTINGER, hereby resign as PRESIDENT  
(Title)

of CLASS ACT MANAGEMENT GROUP, INC  
(Name of Corporation)

P09000094188, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

Marline Pottinger  
(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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