

PI0000002098

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

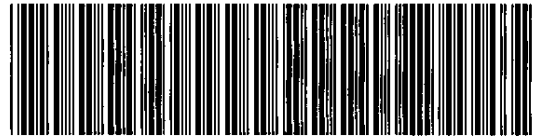
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

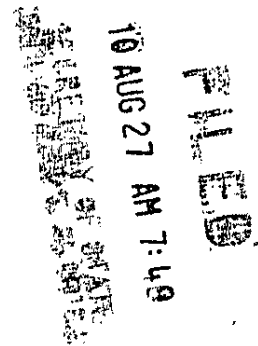
Special Instructions to Filing Officer:

Office Use Only



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08/27/10--01021--007 **35.00



O/D Resign.

DC

08/30/10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: P 10000002098
(Name of Corporation)

DOCUMENT NUMBER: The Hearing Loop Group, Inc

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

Please return all correspondence concerning this matter to the following:

Janice Joslin
(Name of Person)

The Hearing Loop Group, Inc
(Name of Firm/Company)

1202 66th St N
(Address)

St Petersburg FL 33710
(City/State and Zip Code)

For further information concerning this matter, please call:

Janice Joslin at (727) 347-1111
(Name of Person) (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, Barbara Haselden, hereby resign as VPSD
(Title)

of The Hearing Loop Group, Inc.
(Name of Corporation)

P10000002098, a corporation organized under the laws of the State of
(Document Number, if known)

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

FILED
10 AUG 27 AM 7:49