P10000031118

(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Phone Guand, Inc. (Name of Corporation)
(Name of Corporation)
DOCUMENT NUMBER: P100000 31118
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Russ Strunk (Name of Person)
(Name of Person)
(Name of Firm/Company)
1735 EARLE TRACE BLUM (Address)
Conal Spines FL 33071 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (954) 684 4466 (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

PhoneGu	Name of Corpora	tion)		
Olo Dooo 3111 & Document Number, if known)	, a corp	oration organized un	der the laws of the S	State of
FLORINA				
			_	
	Chur !	Junt		12 J
	(Signature o	f resigning officer/direc	tor)	12 JUN -

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