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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Diverse Financial Group Inc. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Shukethia Czmpbell (Name of Person)
Diverse Financial Group Inc. (Name of Firm/Company)
P. O. Box 262 (Address)
Fort Laudordale FL 33302 (City/State and Zip Code)
For further information concerning this matter, please call:
Shukethia Campbell at (954) 348-3439 (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 SECULARISSEE, FLORIDA SECULARISSEE, FLORIDA SECULARISSEE, FLORIDA SECULARISSEE, FLORIDA (Title) The Diverse Financial Group Inc. (Name of Corporation) , a corporation organized under the laws of the State of (Document Number, if known)

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