

P10 0000 59363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

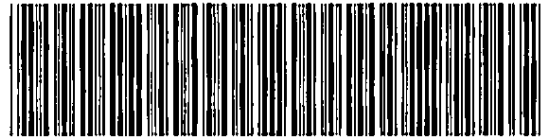
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ADIVVO COVERHAM GROUP INC
(Name of Corporation)

DOCUMENT NUMBER: P100000 59363

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

JONATHAN SHARON
(Name of Person)

ADIVVO COVERHAM GROUP INC
(Name of Firm/Company)

11430 SW 15 LANE
(Address)

MIAMI, FL 33176
(City/State and Zip Code)

For further information concerning this matter, please call:

JONATHAN SHARON at (786) 510-4087
(Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

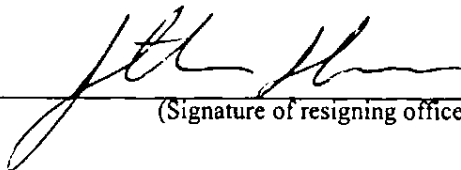
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JONATHAN SHARON, hereby resign as VICE PRESIDENT
(Title)

of ADIVVO COURTNEY GROUP INC
(Name of Corporation)

P10000059363, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

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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