

P/00000098066

(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



300211305103

09/01/11--01014--012 **35.00

Mr / Dr King

FILED
11 SEP - 1 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-6-11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ROADRAGE GROUP INC
(Name of Corporation)

DOCUMENT NUMBER: P10000098066

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

Please return all correspondence concerning this matter to the following:

MICHAEL M CLAVELO

(Name of Person)

(Name of Firm/Company)

15257 NW 88 CT

(Address)

MIAMI LAKES, FL 33018

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL M CLAVELO

(Name of Person)

at (305) 219-5464

(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

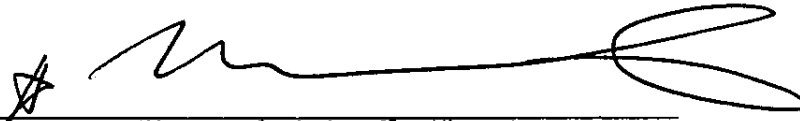
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED
11 SEP -1 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, MICHAEL M CLAVELO, hereby resign as VP
(Title)

of ROADRAGE GROUP INC
(Name of Corporation)

P10000098066, 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