

P18 0000 64506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

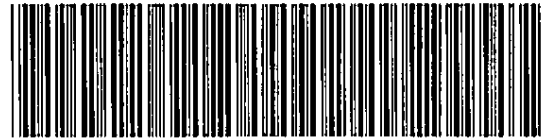
(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Recovery Investment Group, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P18000064506

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

Gertrude Joseph  
(Name of Person)

Recovery Investment Group, Inc  
(Name of Firm/Company)

140 NE 68 Terrace  
(Address)

Miami Florida 33138  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gertrude Joseph at ( 786 ) 285-6156  
(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

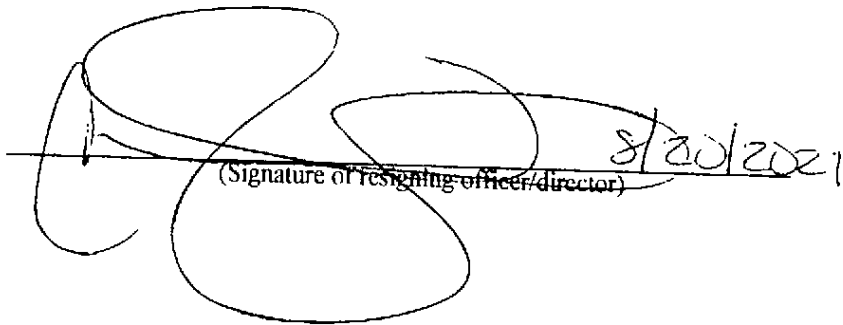
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

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I, Cathia Joseph, hereby resign as Vice President  
(Title)

of Recovery Investment Group, Inc  
(Name of Corporation)

P18000064506, 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