824 080000715

(Requestor's Name)
(Address)
(133,333)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
,
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Office Use Only



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2024 JUL 30 AM 9: 22



TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Force Recovery Group, Inc. (Name of Corporation)
DOCUMENT NUMBER: P24000000715
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mary Soriano (Name of Person)
(Name of Firm/Company)
4000 Mill Spring Circle Apt 4333
Oakwood, GA 305lole (City/State and Zip Code)
For further information concerning this matter, please call:
Mary Soriano at (178) 524-4883 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address: Street Address:

Amendment Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Mary Soriano	hereby resign as	President (Title)	
of Foreel Recov	ery Group Inc.		· ·
P2400000715 (Document Number, if known)	, a corporation organized und	der the laws of the State o	150£
Florida			024 JUL 30
	1	Sec.	
	(Signature of resigning officer/direct)	1: 22

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

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations							
SUBJECT: Force Recevery Group, Inc. (Name of Corporation) DOCUMENT NUMBER: P2400000015							
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Many Soriano (Name of Person)							
(Name of Firm/Company)							
4000 Mill Spring Circle Apr 4333							
Oakwood GA 3051010 (City/State and Zip Code)							
For further information concerning this matter, please call:							
Marie of Person) at (178) 524-4888 (Area Code & Daytime Telephone Number)							
Enclosed is a check for \$35.00 made payable to the Florida Department of State.							
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810							

Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	Mary	Soriano	, hereby resign as_	Preside	(Title)		_
of_	Fore	el Recovery (orporation)				•
_	P240000	MM1115	corporation organized un	nder the laws o	f the State (of	
	Floric	da					
		Mary (Signa	tyre of resigning officer/direct		- -	2024 JUL 30 AM 9:	

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