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(Requestor's Name)						
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(Duringer Entite Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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Special Instructions to Filing Officer:						





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COVER LETTER

Division of Corporations
SUBJECT: PM GMSSIVE FOLIAGE, IN C (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:
ALAN FINEBERG (Name of Person)
(Name of Firm/Company)
P.O.BOX 3985 (Address)
HALLANDALE, 12. 33008 (City/State and Zip Code)
For further information concerning this matter, please call:
ATAN FREBENG at (954) 558-0347 (Name of Person) (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

TO: Amendment Section

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Howard	MELTZER	_, hereby resign as_	PRESI	OEW 7		
of_	PROG	MESS (VE (Name of Corporat	FO.LIAGE	, INC.			_,
	(Document Number, i	, a corpo	oration organized und	er the laws of	the State o	of	
	FORIDA	 			SECRETARY OF TALLAHASSEE, I	09 FEB -5 PM	FILED
•	***************************************	/ / Wu (Signature of	resigning officer/director	or))	STATE FLORID/	1 2: 30	

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