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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Goodman & Associa	ates, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: P940	000052954
The enclosed Officer/Director Resig	nation for a Corporation and fee are submitted for filing
Please return all correspondence cor	ncerning this matter to the following:
David A Rick	
(Name of Person	on)
N/A	
(Name of Firm/Con	mpany)
4440 Spring Lake Hwy	
(Address)	
Brooksville, FL 34601	
(City/State and Zip	Code)
For further information concerning t	this matter, please call:
David A Rick	at (813) 949-6506 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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

I. David A Rick	, hereby resign as Title V		
· · · · · · · · · · · · · · · · · · ·	,,	(Fitle)	
ofGoodman & Associates, Inc.		,	
(Nam	ne of Corporation)		
P9400052954 (Document Number, if known)	, a corporation organized under the	e laws of the State of	
Florida	<u> </u>		
<u>Car</u>	(Signature of resigning officer/director)	2009 APR 29 PM 12: 05 SECRETARY OF STATE TALLAHASSEE, FLORIE	

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