

P97000059142

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

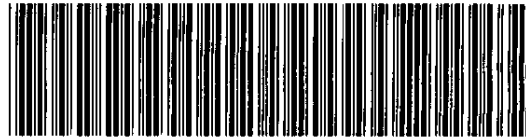
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

10 JUL -7 PM 3:47

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SSGI Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P97000059142

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

Ryan Seddon  
(Name of Person)

N/A  
(Name of Firm/Company)

5391 S.W. Windward Way  
(Address)

Palm City FL, 34990  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ryan Seddon at ( 561 ) 301-9092  
(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

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

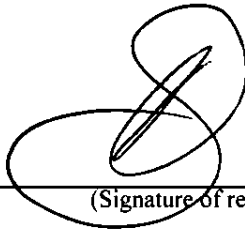
**FILED**  
10 JUL -7 PM 3:47  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE

I, Ryan Seddon, hereby resign as CEO/ President  
(Title)

of SSGI Inc.  
(Name of Corporation)

P97000059142, 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