## P98000038117

| FRANCISCO G. MUNOZ FGM, INC. P.O. BOX 835396 MIAMI, FL 33283  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)                                |   |  |  |  |  |
|--|---|--|--|--|--|
| P.O. BOX 835396 MIAMI, FL 33283  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status | (Requestor's Name)                      |  |  |  |  |
| PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  | FGM, INC.<br>P.O. BOX 835396            |  |  |  |  |
| PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  | (City/State/7in/Dhone #1)               |  |  |  |  |
| (Business Entity Name)  (Document Number)  Certified CopiesCertificates of Status  | (Only/Coales/Liph-Holle #)              |  |  |  |  |
| (Document Number)  Certified Copies Certificates of Status   | PICK-UP WAIT MAIL                       |  |  |  |  |
| (Document Number)  Certified Copies Certificates of Status   | (Puriness Entity Name)                  |  |  |  |  |
| Certified Copies Certificates of Status  | (Dusiness Entry Name)                   |  |  |  |  |
| Certified Copies Certificates of Status  | (Degree and Musels a)                   |  |  |  |  |
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| Special Instructions to Filing Officer:  | Certified Copies Certificates of Status |  |  |  |  |
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Office Use Only



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## TRANSMITTAL LETTER

| TO:                         | Amendment Section<br>Division of Corporations                                     |   |
|-----------------------------|---|---|
| SUBJ                        | ECT: FGM, INC.  |   |
|                             |   | (Name of Corporation)   |
| DOC                         | UMENT NUMBER:   | P98000038117  |
| The en                      | nclosed Officer/Director Resig  | gnation for a Corporation and fee are submitted for filing  |
| Please                      | return all correspondence con   | ncerning this matter to the following:  |
|                             | FRANCISCO MUNOZ   | <u></u>   |
|                             | (Name of Pers   | son)  |
|                             | FGM, INC.   | -   |
|                             | (Name of Firm/Co  | ompany)   |
|                             | P.O. BOX 835396   | <br>  |
|                             | (Address)   |   |
|                             | MIAMI, FL 33283   | <del>-</del>  |
|                             | (City/State and Zip   | p Code)   |
| For fu                      | rther information concerning  | this matter, please call:   |
|                             | FRANCISCO MUNOZ   | at ( 305 ) 582-3395°  |
| 2.00                        | (Name of Person)  | at ( 305 ) 582-3395"<br>(Area Code & Daytime Telephone Number)  |
| Enclos                      | sed is a check for \$35.00 made   | e payable to the Florida Department of State.   |
| Amen-<br>Division<br>P.O. B | ng Address:<br>dment Section<br>on of Corporations<br>sox 6327<br>assee, FL 32314 | Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 |

CR2E044(11/02)

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| I, | FRANCISCO G. MUNOZ                          | , hereby resign as  | PRESIDENT                |
|----|---|---|--------------------------|
| 7  |   |   | (Title)                  |
| of | FGM, INC.                                   | = .   |                          |
|    | (Name o                                     | f Corporation)  |                          |
|    | P98000038117<br>(Document Number, if known) | , a corporation organized under                             | the laws of the State of |
|    | FLORIDA                                     |   |                          |
|    |   |   |                          |
|    | `   |   |                          |
|    | - · 9 w                                     | 2000  | O3<br>SEC<br>TALL        |
| Tr | Mines Jenewo Wy<br>07/01/03 FEN (SI         | FRANCISCO G. MUNO<br>gnature of resigning officer/director) | अप के जिल्ला             |
|    | * \$10110 > FER                             |   | <u> </u>                 |
|    |   |   | D ≨ C                    |
|    |   |   | IC 36<br>TAJE<br>ORIDA   |
|    |   |   |                          |

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 Taliahassee, Florida 32314