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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: ACCURATE CONSULTING LTRANSCRI (Name of Corporation) SERVICE
DOCUMENT NUMBER: (Name of Corporation)
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JOSEPH O. PINNELL
(Name of Person)
SAME AS SUBJECT (Name of Firm/Company)
(Name of Firm/Company)
503 SUMMERSET CT.
(Address)
TNOIAN HARBOUR BEACH, FL 32937 (City/State and Zip Code)
For further information concerning this matter, please call:
TOSEPH PINNELL at (321) 223-0010 (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

I, JOSEPH O. PINNELL, hereby resign as_	PRESIDENT (Title)
OF ACCURATE CONSULTING L'RAW.	SCRIPTION SERVICES FINE
(Name of Corporation)  (Document Number, if known)  (Document Number, if known)	der the laws of the State of
Florida.	₩. O
	F 11
Joseph Dinne	2ℓ EFFS
(Signature of resigning officer/director	STATE STATE

## 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

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