

PD6000155433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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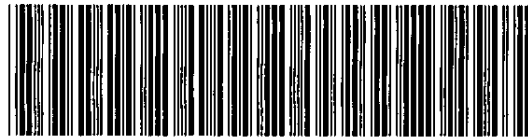
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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C.COULLIETTE

OCT 23 2008

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALTA ALLIANCE INC
(Name of Corporation)

DOCUMENT NUMBER: PO6000155433

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MURIEL E CERTO
(Name of Person)

ALTA ALLIANCE INC
(Name of Firm/Company)

% PO Box 2526
(Address)

ORANGE PARK FL 32067
(City/State and Zip Code)

For further information concerning this matter, please call:

MURIEL CERTO at (904) 521-1312
(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, MURIEL E CERTO, hereby resign as Secretary VP
(Title)

of ALTA ALLIANCE, INC.
(Name of Corporation)

P06000155433, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.

Muriel E Certo
(Signature of resigning officer/director)

FILED
08 OCT 20 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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