P97000052970

(Requestor's Name)	
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(City/State/Zip/Phone #)	l l
PICK-UP WAIT	MAIL MAIL
(Business Entity Name)	<u> </u>
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04 SEP 10 PH 2: 40

TRANSMITTAL LETTER

Division of Corporations	
	(Name of Corporation)
DOCUMENT NUMBER: P 970	00052970
The enclosed Officer/Director Resignati	on for a Corporation and fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Tim O'BRIEN (Name of Person)	
(Name of Person)	, in the second
BVI Connuvications (Name of Firm/Compar	wc
1750 (200 (200	
(750 CORAL WAY (Address)	
MIAMI FC (City/State and Zip Cod	le)
For further information concerning this r	
Name of Person)	at (<u>454)</u> 314-5400 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made pay	able to the Florida Department of State.
Amendment Section Amendment Section Division of Corporations P.O. Box 6327 409	eet Address: nendment Section vision of Corporations O.E. Gaines Street lahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, JEFFREY C. JO	hereby resign as DIRECTOR (Title)
	OICATIONS, (AC. (Name of Corporation)
P 97 0000 52970 (Document Number, if kn	, a corporation organized under the laws of the State of
FLOP (DA	
4	(Signature of resigning officer/director) ALLE TO STATE TO PH 2: 40 FILE TO PH 2: 40
	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