

N000000003606

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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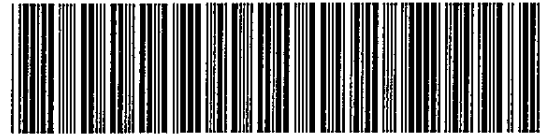
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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10

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ACCESS 4 ALL, INCORPORATED
(Name of Corporation)

DOCUMENT NUMBER: N00000003006

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

Please return all correspondence concerning this matter to the following:

PETER DiPALMA
(Name of Person)

ACCESS 4 ALL INC
(Name of Firm/Company)

3200 PALM AIRE DR N #505
(Address)

POMPANO BEACH, FL 33069
(City/State and Zip Code)

For further information concerning this matter, please call:

PETER DiPALMA at (954) 977-5290
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

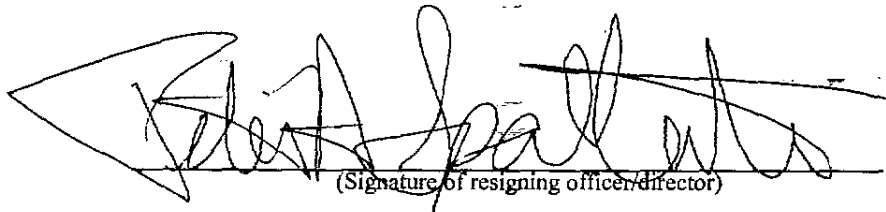
Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, PETER SPALLUTO, hereby resign as VICE PRESIDENT
(Title)
of ACCESS 4 ALL Incorporated,
(Name of Corporation)
N000000003606, 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

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