## F08000001103

(Requestor's Name)				
(Address)				
(Address)				
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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SECRETARY OF STATE
ALLAHASSEE, FI ORIDA

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	TECT: Zamanta III, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: F08000001103
The e	nclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
Please	e return all correspondence concerning this matter to the following:
Khal	id Zaman
	(Name of Person)
Zam	anta III, Inc.
	(Name of Firm/Company)
9900	S. Thomas Dr. #1718
	(Address)
Pana	ama City Beach, FL 32408
	(City/State and Zip Code)
For fu	orther information concerning this matter, please call:
Khali	d Zaman at ( 408 ) 839-4698 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	sed is a check for \$35.00 made payable to the Florida Department of State.
Amen Divisi Cliftor 2661 I	Mailing Address:  dment Section on of Corporations n Building Executive Center Circle assee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

<sub>I,</sub> Nadir Zaman	, hereby resign as Secretary	
-, <u> </u>	,,	(Title)
of Zamanta III, Inc.		
(1)	Name of Corporation)	
F0800001103 , a corporation organized under the laws of the State (Document Number, if known)		the laws of the State of
(Bocument Number, it known)		
Nevada	<del>.</del>	
Cal	in Jan.	
	(Signature of resigning officer/director)	S. S.
	V	08# ECR
		08 MAY ECRETA
		SSE - SSE
		E0 1
	FILING FEE IS \$35.00	STV & COR

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314