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THE CENTER OF STATE

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TRANSMITTAL LETTER

Smith Corbett, P.A.			
SUBJECT:	(Name of Co	rporation)	
DOCUMENT NUMBER: F88852			
The enclosed Officer/Director Resig	gnation for a Corpora	ntion and fee are subr	nitted for filing.
Please return all correspondence co	ncerning this matter	to the following:	
Theresa Amaral			
(Name of Pers	on)		
Smith Corbett, P.A.			
(Name of Firm/Co	inpany)		
1309 SE 25th Loop, Ste. 101			
(Address)			
Ocala, FL 34471			7 P 1
(City/State and Zip	Code)		
For further information concerning	this matter, please ca	ill:	2 PH 1: 03
Theresa Amaral	352	502-5811	
(Name of Person)	Area (Area) Code & Daytime Telep	hone Number)

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Stacie L. Corbett	Vice Presid	lent/Director
I,	hereby resign as	(Title)
Smith Corbett, P.A.		······································
(1	Name of Corporation)	
F88852	, a corporation organized under the la	aws of the State of
(Document Number, if known)		
Florida	·	
A.	Ruth	
	(Signature of resigning officer/director)	AP CA
		J. C J.

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