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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: P.S. SYSTEMS, INC.

(Name of Corporation)

DOCUMENT NUMBER: G90533

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

Please return all correspondence concerning this matter to the following:

Michael S. Bloom, Esq.

(Name of Person)

Michael S. Bloom, P.A.

(Name of Firm/Company)

2200 NW Corporate Blvd. #406

(Address)

Boca Raton, FL 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

Michael S. Bloom

(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 2661 Executive Center Circle Tallahassee, FL 32301

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



(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