## M 70864

| (Requestor's Name)                      |                    |             |
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|   |                    |             |
| (Address)                               |                    |             |
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| (Address)                               |                    |             |
| ·                                       |                    |             |
| (Cit                                    | ty/State/Zip/Phone | <u>, #)</u> |
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| PICK-UP                                 | ☐ WAIT             | MAIL        |
|   | _                  | <del></del> |
| (5)                                     |                    |             |
| (Business Entity Name)                  |                    |             |
|   |                    |             |
| (Do                                     | cument Number)     |             |
|   |                    |             |
| Certified Copies                        | _ Certificates     | of Status   |
|   |                    |             |
| Special Instructions to Filing Officer: |                    |             |
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Office Use Only



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VISION OF BORPORATION
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De Les fr C.COULLIETTE

SEP 28 2011

**EXAMINER** 

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

| SUBJECT: Employee Leasing S  | Solutions Two, Inc. (Name of Corporation)  |
|--|--|
| DOCUMENT NUMBER. M70   | • •  |
| DOCUMENT NUMBER: M/U   |  |
| The enclosed Officer/Director Resig  | gnation for a Corporation and fee are submitted for filing   |
| Please return all correspondence con   | ncerning this matter to the following:   |
| Jessica Sons   |  |
| (Name of Pers  | on)  |
| Employee Leasing Solutions, In   | oc.  |
| (Name of Firm/Co   | mpany)   |
| 1401 Manatee Ave West STE 6  | 600  |
| (Address)  |  |
| Bradenton, FL 34205  |  |
| (City/State and Zip  | Code)  |
| For further information concerning   | this matter, please call:  |
| Jessica Sons   | at ( 941 ) 746-6567  |
| (Name of Person)   | at ( 941 ) 746-6567 (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for \$35.00 made   | e payable to the Florida Department of State.  |
| Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314 |

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

| Robert W. Kelly                    | , hereby resign as VS                                    |
|------------------------------------|--|
| ,                                  | (Title)  |
| of Employee Leasing Solutions      | s Two, Inc.  |
| (Nai                               | me of Corporation)                                       |
| M70864 (Document Number, if known) | , a corporation organized under the laws of the State of |
| Florida                            | ·  |
|                                    | •  |
|                                    |  |
|                                    | Aullu  |
|                                    | (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