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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: THE PROMEDIS	S FOUNDATION, INC.
	(Name of Corporation)
DOCUMENT NUMBER: N	01000002428
The enclosed Officer/Director R	esignation for a Corporation and fee are submitted for filing
Please return all correspondence	concerning this matter to the following:
Norman Fixel	
(Name of I	Person)
LTM International	
(Name of Firm	/Company)
1339 Shotgun Road	
(Addre	ss)
Davie, Florida 33326	
(City/State and	Zip Code)
For further information concerni	ng this matter, please call:
Norman Fixel	at ( 954 ) 849-9385 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 n	nade 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

TALLAHASSEE FLORIDA

, hereby resign as VD
(Title)
ΓΙΟΝ, INC.
e of Corporation)
, a corporation organized under the laws of the State of
<u>_</u> .
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## 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