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COVER LETTER

Enclosed is a check for \$35.00 made 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

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

12

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SEURE TARY OF STATE TALLAHASSEE, FLORIDA

| I. MICHAEL BEN , hereby resign a | as SOARD MEMBER. |
|---|--------------------------------|
| | (Title) |
| of ASSURY) CREDIT Courses of (Name of Corporation) | g- Tric. |
| No locument Number, if known) a corporation organized | under the laws of the State of |
| FlariDA. | ·- · |
| | |
| Mulful (Signature of resigning officer/di | rector) |

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