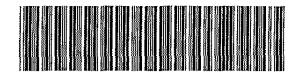
## NO1000005398 DIVISION OF STATE OF APPROPRIATIONS

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V SHEPARD WAY :

## TRANSMITTAL LETTER

SUBJECT: Credit Express		(Name of Corpora	ation)	
DOCUMENT NUMBER:_	NO1000005	5398		
The enclosed Officer/Directo	r Resignation	for a Corporation	and fee are	submitted for filing
Please return all corresponder	nce concerning	g this matter to th	e following:	
Howard L. Schwartz				
(Name	of Person)			
Howard L. Schwartz, P.A.				<b></b>
(Name of F	irm/Company)		,- <b>u</b>	
621 N.W. 53rd. Street, Su	uite 390			_
(Ad	dress)	· · · · · · · · · · · · · · · · · · ·		
Boca Raton, FL 33487				
(City/State	and Zip Code)	<del></del>		•
For further information conce	erning this mat	tter, please call:		
HOWARD SCA (Name of Person	HWADTZ	m 56/	997.	0000
(Name of Perso	$\frac{\sqrt{\nu}}{\text{on}}$	(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

TO:

Amendment Section Division of Corporations

> Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

DIVISION OF CORPORATION.

03 APR 28 PM 3: 10

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. Howard L. Schwartz	, hereby resign as Director
	(Title)
of_ Credit Express, Inc.	
(Name o	f Corporation)
NO100005398 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	mature 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