

NO2000005623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

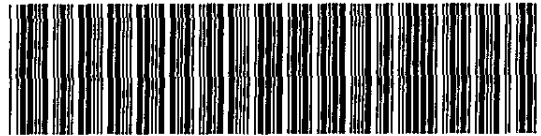
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Credit counseling Inc.

(Name of Corporation)

DOCUMENT NUMBER: N02000005623

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

Please return all correspondence concerning this matter to the following:

Sheila J Ciarlariello

(Name of Person)

Credit Counseling

(Name of Firm/Company)

2700 Cypress Creek Rd. Bldg. A 104

(Address)

FT.Lauderdale

(City/State and Zip Code)

For further information concerning this matter, please call:

David Hollander

(Name of Person)

at (954) 656-8080 ext 2102

(Area Code & Daytime Telephone Number)

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Sheila J Ciarlariello, hereby resign as President /Director
(Title)

of Credit counseling Inc.
(Name of Corporation)

N02000005623, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

*Sworn to and subscribed
before me this 22nd day of
November, 2005*

