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Special Instructions to F	Filing Officer:	
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SECRETARY OF STATE
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Broadway Cush Scalball Icoc (Name of Corporation)  DOCUMENT NUMBER: NOOM 490
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Person)  (Name of Firm/Company)
3420 Cullen Lake Shore Dr. (Address)
Orlando PC 32812 (City/State and Zip Code)
For further information concerning this matter, please call:
Olian Millor at (HO) S95-1432 (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

1, DAMUS D'ARICO III , hereby resign as Treasurer (Title)	_
of Broadway Crush Son Ball True.	2
(Name of Corporation)  (Name of Corporation)  (Document Number, if known)  (Document Number, if known)	
Florida	
ALLAHASS OAD STA	on to the grant of
(Signature of resigning officer/director)	777
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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