

N08000007460

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

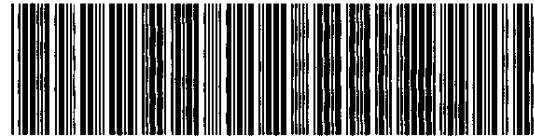
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
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O/D
Resign

7-29-10

DC

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Payment Help Center, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N08000007460

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

Please return all correspondence concerning this matter to the following:

Christian Flores
(Name of Person)

The Payment Help Center, Inc.
(Name of Firm/Company)

332 NW 107 Terrace
(Address)

Coral Springs, FL 33071
(City/State and Zip Code)

For further information concerning this matter, please call:

Christian Flores at (954) 582-8540
(Name of Person) (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, Christian Flores, hereby resign as Secretary
(Title)

of The Payment Help Center, Inc.
(Name of Corporation)

N08000007460, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Christian E. Flores
(Signature of resigning officer/director)

SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 JUL 28 AM 8:07

FILED

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