## N09000001177

(Re	equestor's Name)	
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SECRETARY OF STATE
TALLAHASSEE: FLORID.

off. Presign.

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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: OFFICER/DIRECTOR RESIGNATION
(Name of Corporation)
DOCUMENT NUMBER: N09000001177
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
STUART A. LIPSON
(Name of Person)
LAW OFFICE OF STUART A. LIPSON, P.A.
(Name of Firm/Company)
16900 NE 19TH AVENUE
(Address)
NORTH MIAMI BEACH, FL 33161
(City/State and Zip Code)
For further information concerning this matter, please call:
STUART LIPSON at ( 305 ) 940-2800
STUART LIPSON at ( 305 ) 940-2800 (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



ELLIOTT'S STARS	S, INC.
(Na	me of Corporation)
00000 1177 (Document Number, if known)	, a corporation organized under the laws of the State of
LORIDA	
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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