P00000018864

(Re	equestor's Name)		_
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(Cit	ty/State/Zip/Phone	· #)	_
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Special Instructions to	Filing Officer:		
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB	JECT: AMANDIAN INC
	(Name of Corporation)
DOG	CUMENT NUMBER: P00000018864
The	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	se return all correspondence concerning this matter to the following:
IAN	I CLIVE FROST
	(Name of Person)
AM	IANDIAN INC
	(Name of Firm/Company)
240	01 E ATLANTIC BLVD. STE 204
	(Address)
PO	MPANO BEACH, FL 33062
	(City/State and Zip Code)
For f	further information concerning this matter, please call:
IAN	FROST at (954) 254-4431 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for \$35.00 made payable to the Florida Department of State.
Ame Divi Clift 2661	et Address: endment Section sion of Corporations on Building Executive Center Circle shassee FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, ALEXANDRA ELIZABETH F	ROST , hereby resign	n as SPD
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Title)
of_AMANDIAN,INC.		
(Na	nme of Corporation)	7
p00000018864	a corporation organized	ed under the laws of the State of
(Document Number, if known)	manner, a a a l'in annu a se president	
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_	C	P
A L	excended (Det director)
	(Signature of resigning officer/d	
		A B C
		9: 09 STATE FLORING

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