

PO0000039577

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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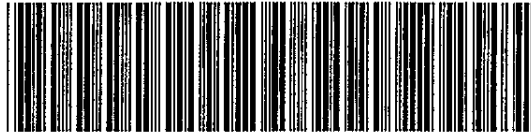
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## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: M.T.M. Staffing, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: PO00000039577

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

Please return all correspondence concerning this matter to the following:

Tommy Andre Bell  
(Name of Person)

M.T.M. Staffing  
(Name of Firm/Company)

15109 Laurel Cove Cr.  
(Address)

Odessa, FL 33556  
(City/State and Zip Code)

For further information concerning this matter, please call:

Tommy A. Bell at (813) 920-9840  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

04 NOV -4 AM 11:17

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

I, Tommy A. Bell, hereby resign as Vice President  
(Title)

of M.T.M. Staffing, Inc.  
(Name of Corporation)

700000039577 a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Tommy A. Bell  
(Signature of resigning officer/director)

**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