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(Reque	estor's Name)	
(Addre	:55)	
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(City/S	state/Zip/Phone	∍#)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nar	ne)
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Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
OF OCT 22 DM 2: 27

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Randy Rosenberg DCPA (Name of Corporation)
DOCUMENT NUMBER: POOOOO 488 44
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Bandy Handel, DC (Name of Person)
Bandy Rosenburg DCPA (Name of Firm/Company)
2809 James River Rd
West Dam Beach Fl 33411
(City/State and Zip Code)
For further information concerning this matter, please call:
Bandy Hand DC at (56) 689 5022 (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

DIVISION OF CORPORATIONS

08 OCT 22 PM 3. 33

	- 7
1, Allen HR osenberg hereby resign as Tres (Title)	
of Randy Rosenberg, D-C.P.A (Name of Corporation)	
POCOOO 48844 a corporation organized under the laws of the State of (Document Number, if known)	
Florida.	
(Signature of resigning officer/director)	
(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
Taliahassee, Florida 32314