

PD10000063287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300238580763

08/20/12--01009--001 **35.00

SP / ED copy

FILED
12 AUG 20 AM 8:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

AUG 22 2012
T. ROBERTS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UNIVERSAL CREDIT, INC.
(Name of Corporation)

DOCUMENT NUMBER: P01000063288

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Adam Sarhan
(Name of Person)

(Name of Firm/Company)

860 N. Orange Ave #423
(Address)

Orlando FL 32801
(City/State and Zip Code)

For further information concerning this matter, please call:

Adam Sarhan at (561) 7676692
(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

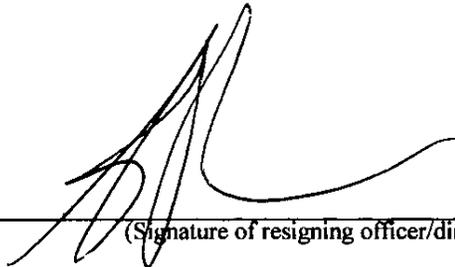
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Adam Sarhan, hereby resign as PD
(Title)

of UNIVERSAL CREDIT, INC.
(Name of Corporation)

P01000063288, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
AUG 20 AM 8:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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