(Re	questor's Name)	<u></u>
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CALL CENTERS OF AMERICA CORPORATION (Name of Corporation) DOCUMENT NUMBER: PO 2000030377
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dod WILLIAMS (Name of Person)
(Name of Firm/Company)
150 WILDMETER SLITTE # 102 (Address)
LONGWOOD FL 32750 (City/State and Zip Code)
For further information concerning this matter, please call:
Robert Sand for at (30f) 215.8283 (Name of Person) at (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, DON WILLIAMS, hereby resign as 11551DENT (Title)
of CALL CENTERS OF AMERICA CORPORATION. (Name of Corporation)
Polono 30377, a corporation organized under the laws of the State of (Document Number, if known) From 194
₹;. O
(Signature of resigning officer/director)
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Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to: