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(Requestor's Name)		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Solution Inc. (Name of Corporation) SUBJECT: 2054830 **DOCUMENT NUMBER:** 

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

Please return all correspondence concerning this matter to the following:

avid (Name of Person)

¥

(Name of Firm/Company) 12611 NW 17 PL. (Address) Coral Springs, FL. 33071 (City/State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at (454) 448-8884 (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, <u>Ernesto Vidal</u>, hereby resign as <u>Directorloff. (Cr</u> (Title) of <u>EDM Solutions</u> (Name of Corporation)  $PO \downarrow OO OO 5483O$ , a corporation organized under the laws of the State of

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35-a<sup>4</sup> \$

(Signature of resigning officer/director)



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## 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