

P020000071571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

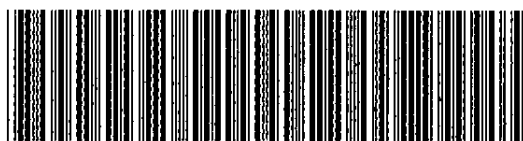
(Document Number)

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200134655032

Resignation
of officer

08/22/08--01032--014 **70.00

2008 AUG 22 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

RR
8/27/08

ZEBERSKY & PAYNE, LLP

August 21, 2008

Via Federal Express

Florida Department of State
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: Cover-All Benefits, Inc.
Document Number: P02000071571**

Dear Sir or Madam:

With respect to the above mentioned corporation, enclosed please find check #8630 in the amount of \$70.00 representing the filing fees for the following documents:

1. Officer/Director Resignation for Natalie Clawson; and
2. Articles of Amendment to Articles of Incorporation.

Please feel free to contact me at (954) 989-6333 with any questions.

Thank you for your assistance.

Very truly yours,

ZEBERSKY & PAYNE, LLP



Simona Bulicich
Paralegal to Todd S. Payne, Esq.

/sb
Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: COVER-ALL BENEFITS, INC.

(Name of Corporation)

DOCUMENT NUMBER: P02000071571

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

Please return all correspondence concerning this matter to the following:

Todd S. Payne, Esq.

(Name of Person)

Zebersky & Payne, LLP

(Name of Firm/Company)

4000 Hollywood Blvd., Suite 675-S

(Address)

Hollywood, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

Simona Bulicich

(Name of Person)

at (954) 989-6333

(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

FILED

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

2000 AUG 22 PM 4:00

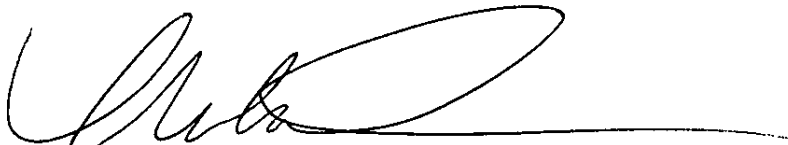
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Natalie Clawson, hereby resign as President/Officer/Director
(Title)

of COVER-ALL BENEFITS, INC.
(Name of Corporation)

P02000071571, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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