Poz00083624

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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(Bu	siness Entity Name)	
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Certified Copies	_ Certificates of	Status
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SECRETARY OF STATE

0/5 Resign.
Mm. 14/03

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT:_AMERICA'S CHOICE LENDING, INC.
(Name of Corporation)
DOCUMENT NUMBER: P02000083624
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SEBRON H. COLEMAN
(Name of Person)
AMERICA'S CHOICE LENDING, INC.
(Name of Firm/Company)
25400 US 19N SUITE 215
(Address)
CLEARWATER, FL 33673
(City/State and Zip Code)
For further information concerning this matter, please call:
SEBRON H. COLEMAN at (727) 712-0085 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. STEVE NARDI	, hereby resign as_	V. PRES/TREASURER	
~		(Title)	
of AMERICA'S CHOICE LEND	ING, INC.		
(Nan	ne of Corporation)		
P02000083624	, a corporation organized under the laws of the State of		
(Document Number, if known)			
Florida	<u></u> .		

(Signature of resigning officer/director)

RETARY OF SAHASSEE, FL

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 +=