

P02000090243

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

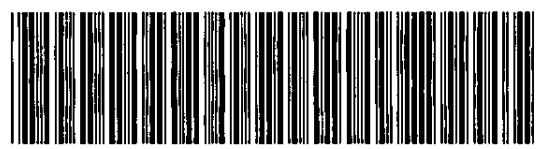
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PUSPA MONI, INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000090243

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

Please return all correspondence concerning this matter to the following:

William Watson Trick, Jr., Esq.
(Name of Person)

William Watson Trick, Jr., P.A.
(Name of Firm/Company)

1216 E. Atlantic Blvd., Suite 7
(Address)

Pompano Beach, FL 33060
(City/State and Zip Code)

For further information concerning this matter, please call:

William Trick at (954) 942-9774 ext 204
(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:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, SHAH M. AYAZ, hereby resign as Director
(Title)

of PUSPA MONI, INC.
(Name of Corporation)

P02000090243, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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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