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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: A & L. MZDIA GROP, INC (Name of corporation) PO30000 21231
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of person) A & L MED, A GROUP INC. (Name of firm/company) P.O. Box 11211 (Address)
NaPles FL 34101 (City/state and zip code)
For further information concerning this matter, please call:
(Name of person) at (237) 354-00 29 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, _	ANGIELLY BETA-COURT, hereby resign as P/S/4 DIRECT	ro.º(
of_	A & L. MEDIA GROUP, IN C. (Name of Corporation)	-
	P-0300021231 a corporation organized under the laws of the State of (Document Number, if known)	
	FLORIDA.	
	A Judge My De Louge of AMIII. A SEE, FLO	Π = π フ

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