P03000049344

(Req	uestor's Name)	
(Address)		
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(City/	State/Zip/Phon	e #)
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COVER LETTER

Amendment Section Division of Corporations

TO:

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**.

SUBJECT:	LUE BUDGET ENTERTAINMENT INC. (Name of Corporation)	
DOCUMENT	NUMBER: P030000 49344	
The enclosed O	officer/Director Resignation for a Corporation and fee are submitted for fi	ing.
Please return all	l correspondence concerning this matter to the following:	
A	NTA ROSHAN	
	(Name of Person)	
LOE BI	UDUET ENTERTAINMENT INC.	
	(Name of Firm/Company)	
6832	BROADMOOR	
	(Address)	
NORTH	1 LOUDERDALE FL 33068	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(City/State and Zip Code)	
For further info	rmation concerning this matter, please call:	
ANTA R	205HAN at (954) 729 - 5942 (Name of Person) (Area Code & Daytime Telephone Number	. r)
'	neck for \$35.00 made payable to the Florida Department of State.	1)

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

CR2E044(08/05)

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

FILED

OFFICER / DIRECTOR RESIGNATION SECRETARY OF STATE

I,	ANITA	ROSHAN	, hereby resign as DIRECTOR
-		100	(Title)
of_	LOE		ENTERTAINMENT, INC.
		(1)	Name of Corporation)
	Po30000 (Document N	49344 Number, if known)	, a corporation organized under the laws of the State of
	FLORIC)A	·
			(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