03000064256

(Re	equestor's Name)	
(Address)		
(Address)		
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	isiness Entity Nan	ne)
(Do	cument Number)	
,	·	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



300109209543

09/18/07--01028--013 **35.00

C. Coulliette SEP 2 5 2007

COVER LETTER

Division of Corporations
SUBJECT: Thswance Consultants Finder porateon (Name of Corporation) DOCUMENT NUMBER: P030600104 2510
DOCUMENT NUMBER: PO30600L04 25LP
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Samantha Duny (Name of Person)
Pay 151 Company) (Name of Firm/Company)
710 Darfield Dr. Ste 102
BYUNGEN FL 33611 (City/State and Zip Code)
For further information concerning this matter, please call:
Samantina Duran at (813) 108451084 (Area Code & Daytime Telephone Number)

TO:

Amendment Section

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

i, Mark Sterra	, hereby resign as VICE President
Thomas and a	Consultante Transconcated
of YIS MUICE	Consultants Incorporated.
2 030000425 LO (Document Number, if known)	, a corporation organized under the laws of the State of
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 SECRETARY OF STATE TALLAHASSEF FI COM

APPROVEL