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(Re	questor's Name)	
(Ad	dress)	
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C. Coulliette NOV 0 8 2006

COVER LETTER

Division of Corporations
SUBJECT: Brian Buchan Inc. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Prian Buchan (Name of Person)
(Name of Firm/Company)
1317 Actiona Ave (Address)
SPRIM HII F1. 346.9 (City/State and Zip Code)
For further information concerning this matter, please call:
Brian Buchen at (352) 650-1954 (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
Post Office Box 6327
Tallahassee, FL 32314

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

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Chystal Buchan	, hereby resign as Secretary & Dice Puesid	ea ea
of Brian Buchan (Name)	The of Corporation),	
P 0 4000007510 (Document Number, if known)	_, a corporation organized under the laws of the State of	
Florida	_··	
Cuph	FILED 2006 NOV -6 AM S TALLAHASSEE, FLO	

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