P04000022511

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TRANSMITTAL LETTER

Division of Corporations	
SOBSECT.	ES OF DELRAY BEACH, CORP. (Name of Corporation)
DOCUMENT NUMBER: P040	00022511
The enclosed Officer/Director Resign	nation for a Corporation and fee are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
ANITA LOWE	PAY BEACH, CORI
(Name of Perso	m) EC T
LOWE & ASSOCIATES OF DEL	LRAY BEACH, CORI
(Name of Firm/Con	mpany) HS Z
4790 Temple Drive	
(Address)	—————————————————————————————————————
Delray Beach, FL 33445	
(City/State and Zip	Code)
For further information concerning to	his matter, please call:
ANITA LOWE (Name of Person)	at (561) 866-2410 (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 409 E. Gaines Street Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

December 6, 2004

ANITA LOWE LOWE & ASSOCIATES OF DELRAY BEACH 4790 TEMPLE DRIVE DELRAY BEACH, FL 33445

SUBJECT: LOWE & ASSOCIATES OF DELRAY BEACH, CORP.

Ref. Number: P04000022511

We have received your document for LOWE & ASSOCIATES OF DELRAY BEACH, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Document Specialist

Letter Number: 304A00068202

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ER / DIRECTOR RESIGNATION OF THE PROPERTY OF T **NICHOLAS A. BARTELL** , hereby resign as Lowe & Associates of Delray Beach, Corp. (Name of Corporation) P04000022511 , a corporation organized under the laws of the State of (Document Number, if known) **FLORIDA** (Signature of resigning officer/director)

OFFICER / DIRECTOR RESIGNATION

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