60400034382

•			
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Green men water of a ming			

Office Use Only



600157131466

06/18/09--01024--010 **35.00

PILED

OPJUN 18 AM 9: 02

SECKETARY OF STATE
ANALYSEE ELOPO

OL Son

COVER LETTER

то:	Amendment Section Division of Corporations
SUBJI	ECT: Pomcor Acquisitions, Inc.
	(Name of Corporation)
DOCL	JMENT NUMBER: P04000024385
The en	closed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please	return all correspondence concerning this matter to the following:
Dane	ette Tagliagambe
	(Name of Person)
Pomo	cor Acquisitions, Inc.
	(Name of Firm/Company)
625 N	N. Flagler Drive, Suite 600
	(Address)
West	Palm Beach, FL 33401
	(City/State and Zip Code)
For fur	ther information concerning this matter, please call:
Danet	tte Tagliagambe at (561) 352-2280
	tte Tagliagambe at (561) 352-2280 (Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for \$35.00 made payable to the Florida Department of State.
Amend Division Clifton 2661 E	Address: Idment Section On of Corporations On Building Career FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Stephen J. Shapiro	, hereby resign asOirector, VP & Asst Sec(Title)	
of Pomcor Acquisitions, Inc.	of Corporation)	_,
P04000024385	_, a corporation organized under the laws of the	
(Document Number, if known)	_, t corporation organized united the laws of the state o	
Florida		T
	- SKR CO	H
		Ö
	F SI ATE FLORIDA	
	DA S	
	ignature of resigning officer/director)	
1		

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